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ABSTRACT

This guide describes a systematic way of identifying the resources and needs of community residents by gathering data, soliciting the perspectives of residents and leaders, and surveying service providers and other community resources. Part 1 of the guide differentiates community assessment from traditional needs assessments and details the 5-step community assessment process: (1) establishing a community planning team; (2) defining community boundaries; (3) developing a statistical profile, including determining what information to collect, gathering the data, and analyzing the data; (4) assessing needs from residents' perspectives; and (5) assessing community resources through provider surveys, association surveys, consumer surveys, and community mapping. Part 2 deals with sorting through the large body of informaticn to set community priorities, focusing on the use of a community assessment matrix to provide a framework for analysis. Two appendices provide (1) guidelines for developing a resident survey and (2) copies of the surveys and other tools described in the guide. (KB)

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Know Your Community

A Step-by-Step Guide to Community Needs and Resources Assessment

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Know Your Community

A Step-by-Step Guide to Community Needs and Resources Assessment

FAMILY RESOURCE COALITION OF AMERICA
BRYAN SAMUELS NILOFER AHSAN JILL GARCIA

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The authors would like to thank the communities of Columbus, Indiana, and North Lawndale, Chicago, for the opportunity to work with them from the ground up on their community assessments. We greatly appreciate all of the residents who volunteered their time and energy and the local service providers, community organizations, and businesses who contributed their resources—including financial support—to these local initiatives. Many thanks to the residents and planners in the many communities with whom we worked to design and develop the tools herein.

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Know Your Community: A Step-by-Step Guide to Community Needs and Resources Assessment

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For additional copies of this book, a list of other publications, or more information on community needs and resources assessment, contact: Family Resource Coalition of America, 20 N. Wacker Drive, Suite 1100, Chicago, IL 60606, 312/338-0900 (phone), 312/338-1522 (fax), frca@frca.org (e-mail), www.frca.org (world wide web).

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Foreword

Communities need good information if they are to develop strategies which can improve the well-being of their children, families, and neighborhoods. Too often, however, communities find that their efforts to collect information and conduct a needs assessment drain scarce energy and resources, create misunderstandings, delay action, and produce documents that shed little light on how to move forward. Assessments which are done "at" rather than "with" communities, or that focus upon deficiencies and fail to recognize assets, disempower rather than energize.

Know Your Community is an antidote to such traditional needs assessments. It presents practical tools that communities can employ in conducting assessments, and it models family support principles. The community assessment process outlined here is community driven, asset-oriented, and inclusive—embodying essential family support principles. It builds community capacity while identifying community needs.

Moreover, it works.

Many of the examples provided in this guide are drawn from a community assessment conducted within the North Lawndale community in Chicago. Residents of this inner-city community—which has a child poverty rate and a school dropout rate exceeding 50 percent and an adult employment rate of 34 percent—participated fully. They were leaders on the planning committee; they participated in focus groups; they answered surveys; they spoke out at community meetings. They added resources, insight, and energy to the effort—as well as exploding many stereotypes along the way. The result was an assessment that set the stage for action.

The potential of this approach is far-reaching in changing traditional views. At one point in North Lawndale, leaders went as far as conducting a focus group with male gang members. They found that the gang members placed as top community priorities the development of work-study opportunities, G.E.D. programs, and health care insurance for their girlfriends and mothers. The power of a strong community assessment is that it can begin to break down even the greatest division and barriers within a community by showing there are common goals on which to build.

Co-author Bryan Samuels worked with North Lawndale in this process. This guide reflects actual experience, and is an important contribution to the work of "reinventing common sense" as a way to address important social concerns.

Charles Bruner, Director
Child and Family Policy Center
Des Moines, Iowa

Introduction

Throughout the nation, community residents are taking control of their destinies. They want a better life for their families. They want a brighter future for their children. Many have come to realize that healthy families go hand-in-hand with healthy communities. As residents strive to build healthy communities, they need information that will allow them to create new community-based approaches to addressing the challenges, opportunities, and concerns that confront them on a day-to-day basis.

Community assessments help to empower community residents to create services and programs that respond to their challenges, concerns, and opportunities. It is a systematic way to identify the resources and needs of residents by gathering data, soliciting the perspectives of residents and leaders, and surveying service providers and other community resources.

Community assessment lays the foundation upon which programs or services, as well as their organizational structure, will be built. It helps community members get the information needed to make decisions and plan for change in their community. It is not designed to be an academic research process. From the beginning, the assessment process should be conducted with an eye toward three strategic goals:

1. Understanding the **current** condition of all families in the community
2. Evaluating the **current** service system's capacity or incapacity to support their healthy growth and development
3. Building community support for, and ownership of, a new intervention

By involving community leaders, service providers, and—most importantly—residents in gathering data, the process will help to:

- Establish joint ownership for change across these groups
- Ensure that new or proposed services respond to community specific needs
- Build trusting relationships between community residents and service providers
- Help to establish the credibility of the project in the community.

The goal is to collect the information in order to design services and systems that are both of the community—built from the resources available in the community—and for the community—designed to meet its specific needs.

Many of the unintended products of conducting a community assessment can be as valuable as the intended products. The community planners come into contact with individuals and organizations who can assist in the planning process or to whom staff can refer community members after the new program or reconfigured services are in operation. These contacts also can be important allies in establishing the credibility of the new program and creating a positive public image. The data collected to document the community's support of, and need for, the program may be included in future proposals for funding and appeals for contributions by other community agencies or organizations.

The Overall Process

This guide is designed to assist community-based planning bodies in completing a comprehensive community assessment. From a strategic-planning perspective, it is important to recognize that community assessment is only one part of a larger process of designing and implementing effective community-based services. The planning process usually includes the steps described at right.

Strategic Planning for Family-Supportive Initiatives

1. Community Assessment

- Establishing a community planning team
- Defining community boundaries
- Gathering information
  Creating a statistical community profile
  Obtaining residents' perspectives
  Assessing the community's resources and assets
- Analyzing the data
  Identifying common issues
  Identifying the individuals affected
  Determining the unmet need
  Assigning levels of priority
- Providing feedback to participants

2. Vision

- Identifying and adopting goals
- Developing a mission statement

3. Designing the Program

- Selecting a site
- Examining model programs
- Setting service objectives
- Establishing program structure
  Staffing
  Outreach
  Linkage agreements
- Setting benchmarks for success
- Defining expected outcomes

4. Clarifying Oversight

- Governing board
- Advisory councils

5. Assuring Successful Operations

- Completing a long-range plan
- Establishing a multi-year budget
- Developing an outreach strategy
- Training staff
- Determining participants' rights
- Involving the community and families in operations
- Minimizing stigma

6. Choosing Evaluation Strategies

- Formative evaluation
- Summative evaluation

It is critical that planners proceed carefully to ensure the highest-quality community assessment. However, limited resources may mean that planners cannot fully complete every assessment strategy or interview every member of the community. Time and money will be the resources most obviously constrained, but as the process gets under way, limits in human resources will surface if planners spread themselves too thin.

Once community planners have considered the factors influencing their ability to assess the community's needs (such as the potential size of the proposed program, the working styles of its organizers, and the resources and support available), it will be helpful to sketch out a time-line to pace the process; six months is the suggested time frame. Establishing new services or reconfiguring existing services demands considerable commitment and perseverance on the part of participants, front-line staff, administrators, and program planners.

How is The Community Assessment Process Different From a Traditional Needs Assessment?

- Residents are involved in the design and implementation of the assessment; they are not simply respondents.

When gathering any kind of information, those who design the questions have a great impact on the type of responses given. By involving residents from the start as partners in community assessment planning and delivery, they can play a part in ensuring that the 'right questions' are asked—questions that are important for their community. Often, however, getting residents involved in the planning process is difficult. Residents have been disillusioned by past assessment processes, they don't feel they can adequately contribute to what has traditionally been a somewhat academic process, and they feel intimidated by the other players at the table. Involving residents in an assessment process requires a significant time commitment up-front.

- It focuses not only on needs, but also on the assets and resources of the community.

In order to demonstrate that the community "needs" dollars, planners have often used the assessment process to create as negative a picture of the community as possible. Unfortunately, by focusing narrowly on the negative aspects, planners first alienate the community they are trying to work in, and secondly don't gather essential information on the services and resources that exist in the community. Thus, they do not have the information necessary to prevent reinventing the wheel with the initiative they propose nor do they make sure that they are building on the positive things that are already happening in the community.

- It is multifaceted and uses multiple data collection strategies.

Many needs assessments focus only on collecting statistical data on various indicators in the community. The community assessment process proposed is based on the concept that this type of statistical information is just one way to look at the community. To be effective this information must be contextualized, with information from community members about the issues in their community, as well as information on the resources available within the community. We suggest not only gathering multiple types of information, but also multiple sources of information, and multiple strategies for collecting the information. These are not options, but strategies that are meant to be used together to create a rich picture of the community needs, assets and priorities.

- It is as much about dialogue and consensus building as it is about information gathering.

One of the primary purposes of this assessment process is to create a common base of information to be used in the discussion of community issues. Thus, the process of the assessment is just as important as the product. This means designing an assessment process that is inclusive in not only who is assessed, but in who is involved in designing the assessment, and who the information gets shared with when the process is over.

- It is not just about social services.

Too often when we think about assets and building blocks in our communities we think only about social service systems. This assessment process is designed to look beyond these-to include the assets and resources, in our informal organizations, as well as the assets and skills that community residents can bring to the table as individuals.

- It is not an academic process.

The assessment process proposed will not stand up to standards of academic rigor, nor is it designed to. This assessment process is designed with the time and resources available to most communities in mind. Our goal was to design an inclusive process that would depend less on the expertise of professional researchers and more on the knowledge of community members.

Why Do A Community Assessment?

- To create an information base for service delivery decisions

Community assessment provides an opportunity to make decisions about programs and services that are truly grounded in the needs, priorities and resources existing within the community-this means services that are tailored to the community-not 'cookie cutter' services designed for "any" community.

- To get community involvement and support

Community assessment provides an opportunity to engage community members—residents, community-based organizations, local businesses, and others—early, before decisions get made. This is an important step in both demonstrating that you want to work in partnership with community members and getting them invested in your initiative or effort.

- To establish joint ownership of change efforts

By bringing community leaders, service providers and residents to the same table, and involving them as equal partners in decision making, the community assessment process starts to forge collaborative relationships across these groups.

- To create a common understanding of community issues

In most communities, individuals only know the part of the picture that directly affects their lives. Community assessment helps to create a common information base from which to make decisions. Having a common understanding about community issues is an important part of building consensus, and working together to create solutions.

- To create a baseline picture of where the community is today

Community assessment can help create a baseline understanding of current conditions within the community. This understanding is important not only to look at the impact of community initiatives, but also to understand how the community is changing over time, and the impact that these changes may have.

The Community Assessment Process

Part 1

The significance of the role of residents in the assessment process cannot be overstated. Residents desire the opportunity to articulate community challenges, opportunities, and concerns from their own perspectives. These perspectives are essential to designing any new service strategy. Families should feel that they are supported and that their views and opinions are respected. The entire assessment process should demonstrate a commitment to responding to residents' specific needs. It should help the community and all of those involved in the planning effort to understand what those needs are and what resources the community already possesses to address them.

This guide's goal is to structure a community assessment process that moves beyond simply identifying all of the deficiencies of a community and its families, and instead view all people and communities as rich in formal and informal support that includes, but is not limited to, formal professional services. This asset-oriented approach, unlike the deficiency-oriented approach, treats individuals, citizen groups, organizations, and government resources as elements that contribute to the well-being of children and families. It seeks to identify the full range of community supports, capabilities, and experiences that might be mobilized and used to meet the needs of families.

In many respects, the strategies presented in this guide build upon the pioneering work of John McKnight of the Center for Urban Affairs and Policy Research at Northwestern University. For many years, McKnight has argued for using an asset-based community development approach to rebuilding troubled communities. McKnight states that the Community Needs Map (see page 4) conveys only "part of the truth about the actual conditions of a troubled community."[1] The Community Assets Map (see page 4), he says, "leads toward the development of policies and activities based on the capacities, skills, and assets" of community residents and organizations.[2] The ideas and strategies discussed in this guide are consistent with McKnight's conceptual framework and emphasize a balanced approach to assessing a community's challenges, opportunities, concerns, and assets.

The community assessment process described in this guide includes five parts:

See **Document 1**

1. Establishing a Community Planning Team
2. Defining Community Boundaries
3. Developing a Statistical Profile
4. Assessing Needs from Residents' Perspectives
5. Identifying Assets and Resources

Establishing a broad-based planning team ensures community participation in the planning process. Defining community boundaries is necessary to ensure community ownership and recognition of the new program or service. The statistical profile provides a snapshot of community well-being. Engaging residents in assessing community needs leads to the identification of the community's most pressing challenges. The final step of assessing resources and assets measures the current capacity of the community to meet its needs.

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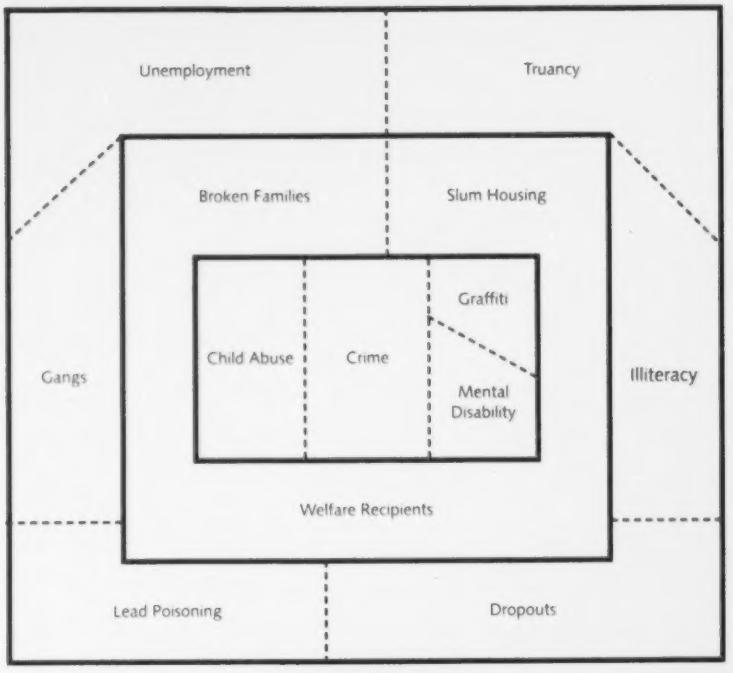
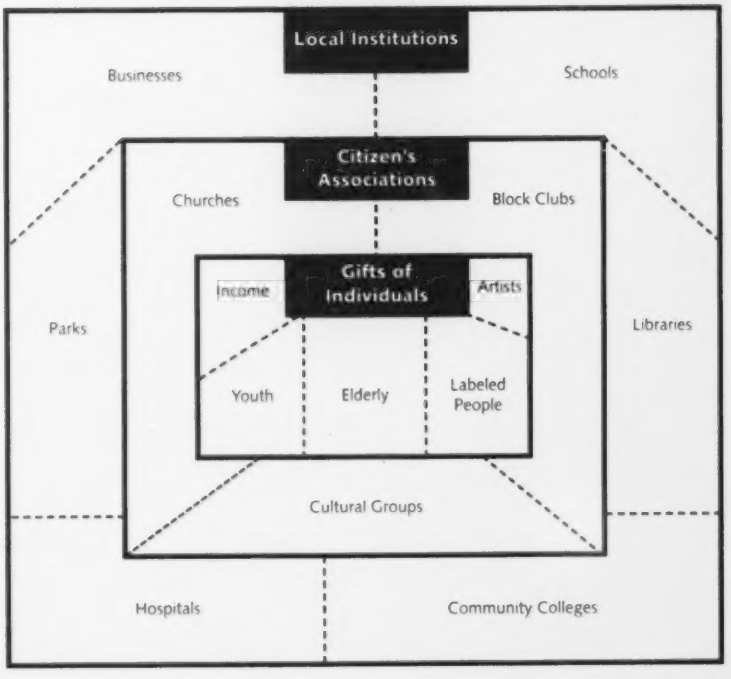
1. Building Communities from the Inside Out: A Path Toward Finding and Mobilizing a Community's Assets, J. Kretzmann and J. McKnight, 2 (Evanston, Ill.: Center for Urban Affairs and Policy Research, Northwestern University, 1993).

2. Kretzmann and McKnight, 5.

Community Needs Map[3]



Community Assets Map[4]



3. Kretzmann and McKnight, 3.
4. Kretzmann and McKnight, 7.

A comprehensive community assessment results in a clearer picture of community needs and resources. It allows the planning team to develop a strong rationale for developing new community services or for reconfiguring those that exist, and enables the community to answer important questions: Why are the challenges identified as priorities by the community not being adequately addressed by resources that already exist? Why does the community need new services or resources? Why are these specific challenges best met through this service strategy?

While this book is useful to those undertaking the first stages of strategic planning, the information it provides does not proceed beyond community assessment to the tasks essential to articulating a vision, designing the program, clarifying oversight, assuring successful operations, and evaluating performance. Technical assistance is available in many of these areas from the Family Resource Coalition of America.

A community planning team made up of residents, service providers, and key public and private decision makers should be formed at the very beginning of the planning process. Health, social service, and school professionals can help the planning team understand the nature of the challenges confronting community residents. Involving public and private decision makers who have the power to change the existing service system can ensure that these people recognize and understand the need for such change. And resident representation on the planning committee can provide insight into the concerns, hopes, and dreams of the community.

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Putting together a planning team is a crucial first step to the community assessment process. Those on the planning team will design the overall assessment, identify the questions asked, and go out and collect the information. In other words, by defining the process, they will also shape what the results of the assessment will be.

Often key players genuinely want to hear the views and opinions of community residents but reserve the right to have final say in all decisions. Before inviting residents to sit on the planning team, they should agree on the extent of their commitment to "bottom-up" service reform.

For the community assessment to be truly "owned" by the community, it will be crucial to ensure that the planning team is representative of the community and includes members from all factions or groups within the community. Those involved in the planning process should include:

- Community residents
- Agency/social service representatives
- Representatives from community organizations (religious organizations, neighborhood groups, etc.)
- Local politicians

The final outcome of the assessment should be a common agenda for change. People will be more likely to be invested in that agenda if they have been active participants in the process from the start. Who are the individuals or groups who can actively contribute to community change? Have you given them an opportunity to take part in this process? How about the people who might be able to block change?

Another set of individuals to involve in the planning process are those who could give logistical help or support. Are there any Universities or Colleges located in or near your community? Often these institutions have students who can support you in your planning processes. Students in sociology or education, for example, often have class requirements that include issues like design and implementation of surveys and focus groups. Local businesses are also often an important asset. Many businesses employ accoun-

tants and researchers who are familiar with spreadsheets, database programs, and the basics of data analysis. Other groups that have regular experience collecting and analyzing community level information are: your local United Way, your Chamber of Commerce, your local Police Department, your City Planner's office. Even if they do not become members of your planning team, they can often provide useful support to you through your community assessment process.

Conducting Outreach

Most people will want to know how they will be expected to be involved. When trying to expand your planning team membership, you should be prepared with the answers to the following questions:

Why is the assessment being conducted?

What type of time commitment will be expected of planning team members (how many meetings, for how long, how much time outside of meetings)?

Why is this particular individual being contacted?

Why is this process important?

Involving Residents

Ideally, community residents should represent at least 50 percent of the planning team. Involvement of residents and local institutions in planning is beneficial because it: (1) increases the likelihood that the plan will reflect their goals and priorities accurately, (2) increases the community's sense of ownership of the planning process—which can translate into a greater determination to see that the plan gets implemented, and (3) makes it difficult for public officials and others to ignore the plan.

Securing residents' participation on planning committees is not easy and should not be taken for granted. Often planners assume that, because their goal is to improve the health and well-being of families, residents will want to participate. Usually this is not a safe assumption.

There are four or five common reasons why residents hesitate to participate in planning projects:

1. They don't understand how their families or neighbors will benefit from the project.
2. They don't feel equipped to make a meaningful contribution.
3. Because of experience with past projects, they have developed a healthy distrust of philanthropists from outside the community.

Outreach to Residents

- Develop a one-page description of the initiative that explains its goals and objectives, states the players involved, and describes how residents will benefit from the planning effort and what role they will play in making decisions.
- Identify a few local "players" who have close ties to the community and are willing to initiate outreach to residents. (These players are likely to be people who live, work, or have grown up in the community.)
- Conduct a series of discussions among groups of four or five residents to explain the initiative and outline how residents can be involved in planning. The role of residents as "experts" on the community's well-being should be emphasized, and the description of the initiative should be distributed. It is important to use the meetings as an invitation for inclusion in the planning process without treating these residents as the "chosen few."
- Conduct a meeting for all residents interested in being on the planning team. Give residents who attend an outline of proposed activities that will be undertaken by the planning team, a schedule of meetings, and a time-line for the work. The meeting should offer residents an opportunity to get to know one another and discuss their views of the community and its current systems of support for families. A limited number of the planning partners should attend, so that residents will feel free to exchange their ideas, in their own language, before they meet with the larger planning team. Planners must use outreach efforts to contact those invited, reminding them of the meeting time and place, as well as reducing barriers that may prevent them from attending.

4. They are intimidated by the professionals involved in the planning process, who all speak the same language and may have already defined their agenda.
5. They don't perceive that there is a well-defined, appealing role for residents in the decision-making process.

This last element is often the most difficult to address. Often key players, who can change systems and allocate resources, genuinely want to hear the views and opinions of community residents but reserve the right to have final say in all decisions. Before inviting residents to sit on the planning team, key players should agree on the extent of their commitment to establish a "bottom-up" process of service reform. The results of this discussion should be clearly articulated to residents so that they can gauge for themselves whether the amount of decision-making power given them makes participating in the planning process worthwhile. Lack of clarity with residents about their role may create an adversarial and distrustful relationship. Ultimately, residents want to feel not only that they have been allowed to participate, but that they have been decision makers.

In a resident-focused community assessment process, the planning team should invest a great deal of energy in outreach efforts. The actions listed at right are recommended to encourage residents' full participation. In planning and carrying out these and other activities, planners need to address residents' concerns regarding childcare, food, reasonable accommodations for individuals with disabilities, and transportation.

The city of Columbus, Indiana, provides an excellent example of how the planners can follow these steps in a manner respectful of the community. During spring and summer 1994, a planning team began to develop a school-linked family resource center. The initial planning team members were very excited about this project, but realized that they needed greater participation from residents who lived in the immediate area of the school. They devised and carried out a strategy to conduct outreach, but their methods failed to elicit much interest from residents, which raised serious concerns among the planning team members.

In a ground-breaking meeting, however, the team identified basic flaws in their outreach effort: having no concise description of the initiative to share with residents, not taking advantage of relationships that team members already had with residents, and not clearly articulating the role of residents in planning and decision making.

A business owner on the planning team led a new and more effective strategy for promoting resident involvement. First, the team decided how they would describe the planning process and the residents' role to residents. Then they wrote the one-page description of the initiative that team members would use in their outreach efforts. Third, they created a "buddy-system": each team

member would find one resident who would be his or her partner or buddy in the planning process, building on pre-existing community relationships. Team members made a personal commitment to provide whatever support was needed—timely reminders, transportation, childcare, food—to enable their partners to be involved for the duration of the planning effort. An inherent strength of the "buddy" strategy is that it ensures that residents will always constitute 50 percent of the planning team.

As previously discussed, the very people whom the new services are designed to serve—families in the community—are often the most reluctant to be involved in planning efforts. Residents need to have more than one opportunity for engagement in the planning process. Being a member of the planning team is only one option for influencing the planning of services. Focus groups, surveys, and interviews are additional techniques to involve residents whose input is essential, but who find participating in a team effort difficult. Planners should seek creative ways to connect with hard-to-reach children, youth, and families to gain their input into the assessment, design, and implementation phases of planning.

Agree on the Basics

Once the planning team is in place it will be important for members to clarify, and agree upon, the basic purpose of the assessment including:

- *What will this information be used for?*

  What community planning processes and decisions will be influenced by the information in the assessment?

- *What key questions does the assessment need to answer?*

  While different portions of the assessment will answer different questions, it is important to have agreement on what you hope to learn, overall, from the assessment process.

- *What is the timeline for the assessment?*

  When do you hope to finish the information gathering, with analysis, with write ups?

- *How will information be disseminated when the assessment is over?*

  Will there be a written report, will you hold a town hall meeting, will you publish results in the local newspaper? It is important to think of all the possible audiences for assessment information—including those who gave you the information.

- *Why should people participate in the assessment?*

  What are the benefits for them, for their families, for the larger community?

The answers you construct to these questions will be central to the larger assessment process. They will be used to construct the cover letters for surveys, as the introduction for focus groups and interviews, and in conversations with resource providers. If they are not convincing to your planning team they will not be convincing when you use them in the community. Remember that the answers to these questions will be used as a way to communicate the importance of this process to the community. Stay away from social service speak, acronyms, and academic jargon!! Try to be clear and concise and to use language that is easily understandable by all members of the community.

Ensuring a Functioning Planning Team

If there is little or no history of broad-based collaboration in the community, or if there is polarization or lack of trust among those who should be involved, a facilitator can be a key component to successful planning. This person coordinates the planning, agenda setting, and scheduling of meetings, as well as attending all meetings. He or she plays an important role in ensuring that the team brings diverse ideas together and works toward the goals it has identified. To bridge gaps between members of the coalition, the facilitator should be a neutral party who is not affiliated with a government entity or a service provider. He or she will need to commit a considerable amount of time—approximately six hours per week—to managing the process.

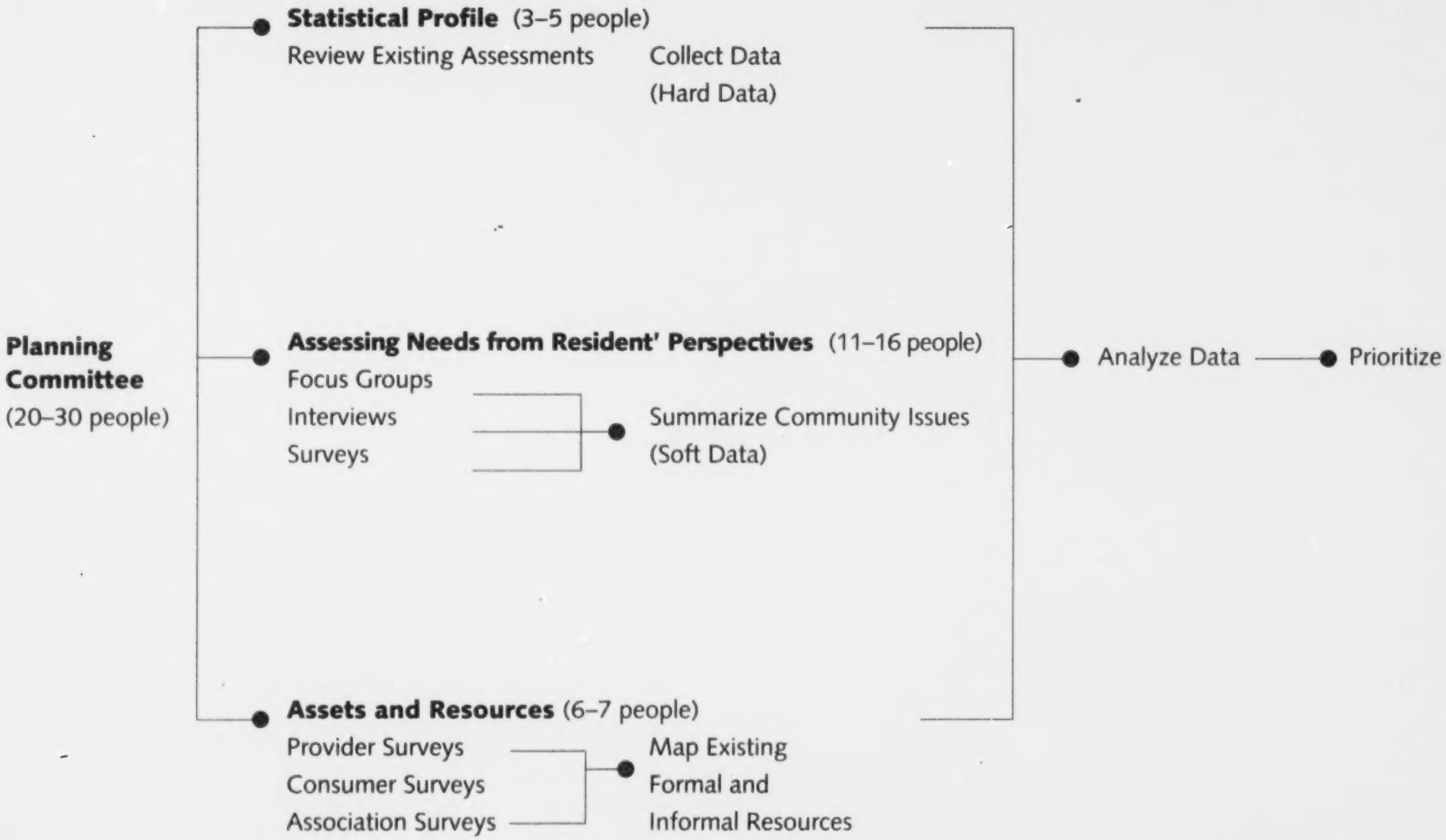
The facilitator can assist the group in the decision-making process. In consensus building and conflict resolution, the facilitator should emphasize the team's options for solving problems and removing barriers to collaboration. The following techniques can help the group maximize its decision-making potential:

- Separate the people from the problem.
- Focus on the team's interest in a specific outcome, not on any team member's "position" on the issue.
- Generate a variety of alternatives before deciding upon an action to take.
- Insist that decisions be based on objective criteria.

The facilitator should build a base of trust with the team. A facilitator can enhance coalition building by encouraging openness, informality, idea sharing, and positive relationships in which power is shared. Once everyone feels like a bona fide contributor to and beneficiary of the planning, the process of working together for the well-being of the community and its families will be off to a strong start.

The size of the planning team should be determined by the amount of work to be completed. If the team is too small, members will quickly become overworked and will not have enough time to do an adequate job. Planning teams with too many members may have difficulty in coming to a consensus and making decisions. All things considered, however, it is better to start with too many, rather than too few, members. It is likely that some individuals will be unable or unwilling to see the planning process to completion. Having a larger group eliminates the need to replace members who leave with new ones who are not up to speed on the planning process. In the beginning, a planning team of 20 to 30 members should be sufficient to conduct a comprehensive community assessment.

In summary, an effective community planning effort requires that all segments of the community share decision making and responsibility. Experience shows that some communities benefit from a neutral party facilitating the planning team's efforts to effect positive change for families.


Planning Committee
(20–30 people)
Statistical Profile (3–5 people)
Review Existing Assessments
Collect Data
(Hard Data)
Assessing Needs from Resident' Perspectives (11–16 people)
Focus Groups
Interviews
Surveys
Summarize Community Issues
(Soft Data)
Assets and Resources (6–7 people)
Provider Surveys
Consumer Surveys
Association Surveys
Map Existing
Formal and
Informal Resources
Analyze Data
Prioritize

2

Defining Community Boundaries

Before beginning a community assessment, it is important to recognize community boundaries. Too often, state, county, or city agencies impose their own "service areas" on communities and pay little attention to the historical, cultural, and economic demarcations that exist within a particular geographical area. They fail to recognize the positions of informal social support networks within the area, and as a result, their services and service delivery may be inappropriate or under-utilized.

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Residents generally have a good idea of their own community's boundaries, which do not always correspond to school attendance areas, census tracts, or political wards or boroughs.

A preliminary map drawn to define boundaries within the community should be validated by residents throughout the area to ensure that the boundaries correspond to those that residents themselves might draw. These boundaries will help identify where new services might best be established, where other services need to be developed, and where outreach activities will be necessary to increase residents' use of services.

Program Examples:

Seven counties in Illinois were instructed by state administrators to develop a joint plan for reforming their human services. Because each county had its own history, customs, and strategies for supporting families, state planners were forced to rethink the boundaries they had inappropriately delineated. They ultimately had to support seven separate planning efforts.

The State of Georgia selected a community in Atlanta—a city that straddles a county—to participate in a community-based planning project. The selected community spanned two counties, and residents on each side of the county line historically had viewed themselves as a separate community. After several attempts to bring these two communities together in the spirit of collaboration, it became clear that a single planning effort was not possible. State planners finally expanded the project to include each of the communities as a separate entity.

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The planning team must be aware of the effects of community boundaries and internal social networks upon every aspect of the planning process. Say, for example, the community planning team wishes to designate sites for family centers. The community's elementary school attendance area includes several neighborhoods, which are separated by rigid cultural divisions. Families in a predominantly Mexican-American neighborhood, a predominantly African-American neighborhood, and a predominantly Irish-American neighborhood all send their children to the same school but have separate networks, groups, and community leaders. It may or may not be possible for a single family center to serve all three of these ethnic groups. The only way community planners will foresee this, however, is if they recognize at the outset that there may be different groups within the community, and nurture contact with and identify representatives from each. The issues of what resources are currently available and how best to provide resources given such boundaries will be addressed in greater detail in chapter five.

Once a fully representative planning team has been established, and the community has mapped out its boundaries, the groundwork for an effective community assessment has been laid.

Developing a Statistical Profile

The first step in the process of a community assessment is to develop a comprehensive profile that presents the well-being of children and families in the community. The community profile is based on quantitative, objective data gathered from a variety of sources including the Census Bureau, state governmental departments, city and county agencies, police and fire departments, and the United Way and other service agencies. The community profile:

- Acts as a snapshot for program planners and community members, indicating current community conditions
- Provides data to support and validate the concerns and priorities of the community
- Creates baseline data to gauge the effects of services at a later date

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While many standard assessments use information from sources similar to those used to create a community profile, too often, they simply aggregate lists of indicators that demonstrate and document significant levels of dysfunction with regard to children, families, and the community at large.

See Document 2

Determining What Information to Collect

Planners should keep in mind the following points when determining what information to collect for a community profile:

- Information should cover a variety of dimensions of well-being, including medical, social, psychological, educational, and developmental.
- Information should be collected on a regular (usually annual) basis, and indicators should be comparable from one period to the next.
- Special care should be given to recognizing the quality of the information, and its limitations as well as its uses.
- Indicators that are designed to serve as "markers" toward success in larger areas of well-being should not be used as ends in and of themselves (e.g., if immunization rates are used as markers indicating the receipt of primary and preventive health services, communities should be wary of starting campaigns for immunization that do not include other primary or preventive health services).

There is no one set of indicators that will be right for every community. Planners need to be flexible and identify the set of indicators that is meaningful for their community. Rural communities, for example, may want to collect information on the availability of transportation; this indicator may be less relevant in urban communities. The suggested indicators list on the following page is meant to be adapted to meet the specific needs of each community.

Overview of Community

- Number of individuals
- Number of families
- Number of households
- Number of children, by age groups
- Ethnic make-up of community
- Median per-capita income
- Income distribution
- Percentage of children living below poverty line
- Number of families receiving public assistance
- Numbers of households with various family configurations (single female headed, extended family, etc.)
- Number of families eligible for WIC program
- Number of families in WIC program
- Percentage of individuals in labor force
- Percentage of housing units that are owner-occupied
- Median gross rent as a percentage of household income

Education

- Percentages of kindergarten and first-grade students assessed as ready, not ready for school
- Size of Head Start–eligible population
- High school graduation rate
- Number and percentage of students identified for special education services
- Educational attainment for persons 18 and over
- Number and percentage of children three and older enrolled in school
- Numbers of children enrolled in various types of school (public, private, etc.)

Health

- Birthrate
- Rate of low birth weight in babies
- Rate of attainment of prenatal care
- Median age of women giving birth
- Infant mortality rate
- Median number of school days missed due to illness
- Number of children with developmental delays at entry into school
- Number of residents eligible for Medicaid
- Number of residents enrolled in Medicaid

Child and Family Welfare

- Percentage of parents who participate in parent-teacher conferences
- Percentages of children who live with one parent, two parents
- Percentages of families in which both parents are in the labor force
- Rate of child abuse and neglect reports
- Rate of confirmed child abuse and neglect cases
- Rate of out-of-home placements of children

Gathering the Data

The first step in gathering data for a community profile is to assess what sources of data are available and determine the types of indicators that are covered by these sources. There are two kinds of data: (1) primary data (information gathered first-hand) and (2) secondary data (information that another entity has compiled either in an existing needs assessment or in a report or publication). Always review existing secondary data sources before constructing your own profile analysis.

Document 3 can be used to keep track of which planning team members are responsible for gathering data on the various indicators, and what sources they will use.

Secondary Data

By using data previously compiled whenever possible, planners can minimize the drain on their time and resources. When reviewing existing data, please consider the following:

Quality: All data is not created equal. Sometimes assessments make claims based on a very small sample size, or based on data that was not collected from a representative sample. When looking at existing studies, read the methodology section, find out how the information was collected, by whom, and from whom.

Fit: What is the makeup of the population for which the data was gathered, and how close is this population to the population in your community? Be especially wary of using city- or county-wide data when the demographics of your community are markedly different than the rest of the city or county. Even though your community may be in the county, it may look very different than the county as a whole. City-wide statistics in a city like Chicago, for example, may have little relevance to the communities within the city. The Gold Coast probably has demographics closer to that of the wealthy northern suburbs than to the city's south side, and city-wide averages probably reflect the reality in neither of these communities.

Timeliness: Always check when the data was collected. As statistics are often cited from source to source, a report that was published five years ago might actually contain data that is significantly more dated.

Repeatability: One of the key uses of assessment information is as a baseline for your community. Baselines are only useful if you can measure change in the future. Identify when and if the data will be collected and published again. Data that is collected and published annually is the most useful for measuring change. Other sources which are only collected periodically, can be used for measuring more long-term change. Census data is collected every ten years, for example. Avoid data sources which were collected for a single purpose and may not be collected again.

Primary Data
Information gathered first-hand by the planners

Secondary Data
Information that another entity has compiled, such as a report or publication

One advantage of census data is that it provides information at the neighborhood level, whereas data gathered from many other sources does not. Also, it offers comparable data pertaining to other communities and to the city, county, state, and country in which the community exists.

See **Document 4**

Primary Data

Individual communities often have rich, unique sources of relevant primary data. Below are suggestions of primary sources of information that are likely to be available in any community.

Health Care Providers: Birth and death rates and marriage and divorce rates can be found in state and local health departments. They also may have statistics on infant mortality and low birth weight and child and adolescent mortality which are often categorized by cause (accident, disease, suicide, homicide). Immunization rates may also be available though health departments. Many states require the collection of other morbidity and mortality information for special populations (cancer, or immunizable communicable diseases such as measles, polio, and AIDS).

Public Safety Representatives: Local police and fire departments and 911 lines keep information on the incidences of crime and crisis. These entities sometimes map this data to identify patterns of troubled areas. These agencies may also have building inspection data that can provide useful information on housing and the age and safety of local facilities.

Economic Development Entities/Chambers of Commerce: The local department of economic development and/or Chamber of Commerce have a plethora of strength based data. Since one of their primary functions is to market the local community to outside businesses they are a useful source for positive indicators of community well-being. Working through the Chamber of Commerce may open up large amounts of privately collected data that is currently used by banks, insurance companies, marketing firms, and other local businesses.

Religious Institutions: The potential impact of religious institutions on their communities is enormous. Not only are they a resource for volunteers, monetary assistance, and community meeting space, but their spiritual and philosophical beliefs often coincide with the beliefs espoused by the providers of support to children and families. Religious institutions are a valuable resource as a partner in community initiatives or perhaps as a provider of services themselves. Many are already a provider of services and may have useful data to contribute.

State & Local Planning Departments: Planning departments have access to a plethora of census information on the number of children (organized by into age categories), composition of families (listed by head-of-household), poverty status of families and children, employment status of adults, housing conditions (stock and value), adult educational attainment, earnings, family structure, and ethnicity patterns in the community. This information is available in table form, organized by block, block group, census tract, as well as city and county wide aggregates. These entities are also a potential source of funds and support for family and community initiatives.

School Administrators: Local schools keep and collect data that can help programs gauge the well-being of children within the community. School records provide information on educational attainment, health, immunizations and screenings required for school entry, and the number of students who experience educational and developmental difficulties. Additionally, schools may keep information on parent participation in parent-teacher conferences, PTA meetings, and other targeted, school-based activities.

Service Providers: In every community, nonprofit organizations provide an array of services to families. Many of these service providers already possess an understanding of the challenges and concerns facing families. In assembling a planning team it is important to know what roles these providers play in the community, whom they serve and how they serve their target population.

Working through the Chamber of Commerce may open up large amounts of privately collected data that is currently being used by banks, insurance companies, marketing firms, and other local businesses.

Associations: The basic community organization for empowering individuals and mobilizing their capacities is the association. An association is a group of citizens working together for a common mission. An association is an amplifier of the gifts, talents and skills of individual community members. Associations may be very formal with elected officers and paid members or they may be informal with no officers or formal memberships.

Other Sources: State and community organizations may collect data concerning children's and families' well being that could be included in the community profile. Planning bodies, task forces, and agencies' strategic planning units often collect data either periodically or to inform specific decisions. Additionally, organizations such as the local United Way and the state Kids Count data collector compile detailed, community specific data.

Whenever possible, communities should collaborate with others collecting data to construct their community profiles.

Analyzing the Data

Again, the community profile should paint a general picture of the well-being of the community and its families. The information gathered should be factual: empirical data that stands independently, without value judgments. These facts do not represent community problems until they are judged by community members to be indicative of negative or harmful conditions.

The facts gathered while compiling a profile do not come to represent community problems until they are judged by community members to be indicative of negative or harmful conditions.

The first step in this process is to compare data collected in the community profile with recognized standards. Having collected the core set of data indicators described earlier, the data subcommittee will need to do an initial analysis of which indicators are strengths and which are weaknesses. In most situations, normative and relative standards can be used to make this decision.

A normative standard is one that has been previously established by tradition, authority, or general consensus, and to which the community-specific indicator can be compared. The federal government's poverty line, for example, is a normative standard to which a family's income can be compared to help determine that family's socioeconomic well-being. In 1992, the official poverty line was $9,137 for a family of two; $11,186 for a family of three; and $14,335 for a family of four.

Normative Standard

- Has been previously established by tradition, authority, or general consensus

Many indicators, including some of those suggested in the previous chapter, do not have normative standards. For that reason, relative standards are often used to make decisions. There are two ways to use relative standards:

Relative Standard

- Allows comparison of same indicator in two communities

or

- Allows comparison of indicator in same community from one time period to another

(1) An indicator in one community can be compared with the same one in another community. For instance, a community profile might show that the teen pregnancy rate is 13 percent; however, since there is no useable normative standard, it is difficult to determine whether that teen pregnancy rate is a positive or negative figure for that community. If, after further research, the community finds that a similarly situated community has a teen pregnancy rate of 17 percent, or that the state's average is 22 percent, then it is in a better position to reach a consensus on whether teen pregnancy is a problem in relative terms.

(2) Measure the change in an indicator within one community over a period of time. For instance, in 1987, five million children under age six lived in poverty, while in 1992, six million children under age six lived in poverty. These figures demonstrate that the number of children living in poverty increased by one million in just five years. This is a good example of data that should "jump out" at the people responsible for completing the community profile. Those analyzing data such as this, which deviates significantly from the average, should be sure to report it to the larger planning team.

Indicator	Planning Team Member Responsible	Community Data	Source(s)

Community Residents
School Administrators
Health Care Providers
Service Providers
Planning Team
Public Safety Representatives
Local Planning Departments
Economic Development Entities
Religious Institutions

The data subcommittee should report to the larger planning team by presenting:

1. A core set of information that captures the overall well-being of families in the community
2. Any data that indicates significant strengths in relative or normative terms
3. Any data that indicates significant weaknesses in relative or normative terms
4. Any trends that may come to represent strengths or weaknesses in the near future, even if they do not do so currently

It is crucial that the data subcommittee review all indicators and document them thoroughly for presentation to the larger planning team so that the well-being of families in the community can be accurately understood.

Steps to Get You Started

To get started compiling a community profile, the planning team should answer these questions:

- **Which members of the planning team should collect the key data?**
- **What additional individuals or agencies should join the data collection efforts?**
- **Where should they start to collect the key data?**
- **Has any of the needed information been collected already? By whom?**
- **Are there specific documents that contain this information?**
- **What agencies would have access to the information?**
- **Can state, county, or local government agencies or the United Way facilitate the collection of information?**
- **Who should review existing documents for key indicators?**

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All too often, community assessments are conducted without input from those who best understand the assets and needs of the community—the residents themselves. Engaging community residents in the assessment process ensures a more complete picture of the community and its strengths and challenges.

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Residents can provide answers that cannot be gathered elsewhere about their day-to-day realities, including undocumented, informal supports.

The purpose of this part of the assessment process is to learn from community residents what issues they think impact their lives both positively and negatively.

Residents can provide information about barriers to utilizing existing services and community resources. They can highlight the issues that are of most concern to them and divert planners from items of less immediate importance. Most important, residents can provide key insights into strategies that are more likely to work given the opinions, concerns, and needs of the residents.

After compiling a community profile, the planning team must learn from residents what their most pressing challenges, opportunities, and concerns are. Too often, planners assume that the community's problems are well understood and that solutions to the problems already exist. Many ambitious community planning efforts fail because they do not accurately define and understand the nature of the challenges facing community residents.

Document 5 provides a brief summary of each information-gathering strategy.

The challenges facing children cannot be seen as separate from those facing their families, nor from those confronting the larger community. Community planning efforts that do not take the time to understand the interconnectedness among children, family, and community are likely to fail, because it is exactly this interconnectedness that comprises community.

The process of assessing community needs should focus primarily on understanding the nature of community challenges from residents' perspectives. In most cases, indicators will be considered community problems when the residents determine that they point to negative or harmful characteristics. The purpose of this part of the community assessment is to learn from community residents what issues they think impact their lives positively and negatively.

Strategy	Definition	Advantages
Focus Group	Series of small meetings to solicit opinions, anecdotes, experiences, and impressions from small groups of individuals	• Is relatively easy to arrange • Can be more efficient than other needs-assessment methods • Builds community identity by initiating discussion on community issues • Develops community consensus through priority setting
Key Informant Interview	Interview with an individual with important information about the community, i.e. public official, administrator or staff member of health or welfare organization, health care provider, etc.	• Allows for detailed responses to questions • Requires minimal expenditure of resources • Lends focus on specific issues to needs assessment effort • Allows for clarification of questions and answers • Ensures high response rate • May establish communication lines among human services agencies represented
Resident Survey	Formal, systematic survey of defined populations in specified geographical areas to gather information on residents' health, social well-being, and pattern of service utilization	• Provides respondents anonymity • Provides up-to-date data • Has considerable design flexibility • Can provide data on individuals with unmet needs and barriers preventing their access to services • Can be broadly and inexpensively distributed by mail

Determining What Information to Collect

The process described in this guide emphasizes the voice of the community resident. The information collected during this and all portions of the community assessment should capture the priorities of community residents. The first step in obtaining residents' perspectives is to develop a list of questions that will be asked of all participants in the information-gathering process. The following list of questions should be at the core of each data-collection strategy, even if the planning team chooses to phrase the questions differently to suit the target population:

1. What are the positive and negative characteristics that most accurately define the community?
2. What are the strengths that hold families in the community together?
3. What are the most pressing challenges and concerns confronting residents of the community?
4. What services, activities, and resources are needed to address these issues?
5. What barriers prevent residents from obtaining the services they need to address their challenges and concerns?
6. What strengths and resources to support families are currently in the community?
7. How can these strengths and resources be fortified and supported?
8. What community services and programs do residents use most?
9. What types of contributions can residents make in addressing the problems that most affect the community?

Responses From the Grand Boulevard Community

What are the ten largest challenges facing your community?

Group One	Group Two
1. Drugs sales/addiction	1. Drug sales
2. Lack of security and service	2. Gangs
3. Lack of recreation	3. Poor parenting skills
4. Unemployment	4. Public housing dwellers
5. Lack of parenting skills	5. Teen pregnancy
6. Child abuse	6. Dysfunctional families
7. Lack of family support	7. Violence/crime
8. Low self-esteem	8. Single-parent families
9. Inadequate family services	9. Poor life skills
10. Lack of or inadequate access to jobs/training	10. Unemployment

While these two lists of community challenges appear similar at first glance, further scrutiny suggests there is considerable difference between the groups' perceptions of the community's problems. While Group Two sees socially and economically vulnerable people as problems ("public housing dwellers" and "single-parent families"), Group One cites mainly a lack of services and resources, with the implication that this lack keeps people vulnerable. It is clear that a planning team would need to put considerable time into reconciling these groups' differences. The team is likely to move toward consensus only after an in-depth discussion occurs around the differences in the two groups' perceptions of the problems.

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Experience has shown that the more specific the questions are, the higher the quality of the answers will be. Questions used in the focus groups, key informant interviews, and resident surveys should be consistent with one another to make comparison possible. If the questions differ significantly from one information-gathering strategy to the next, it is likely the answers will too. Such discrepancies make it difficult for members of the planning team to synthesize data that has been gathered using various strategies. In addition, the planning team should make every effort to ensure that the questions are unbiased, and should avoid wording questions in a way that would encourage a certain kind of answer.

The planning team should expect differences among community members' perceptions of the community's most significant challenges. One of the goals of this process is to create a forum for discussing and building consensus on these differences. On the previous page are two lists of community challenges given by two different focus groups in the same community.

Whether focus groups, interviews, or surveys are used, personal or identifying information should not be collected. Total anonymity encourages participants to feel comfortable sharing information, since nothing they say can be traced back to them. Furthermore, information that identifies individuals is not particularly relevant to the planning process. The purpose of the community assessment is to identify the opportunities, challenges, and needs of people in a specific geographic community. Any information that is not central to that purpose is cumbersome.

Combining Information-Gathering Strategies

A very ambitious community assessment covering St. Joseph County, Indiana (population 274,052), is an example of how planners can combine information-gathering strategies. The project used primarily 18 focus groups; 2,135 completed surveys; and 80 key informant interviews to facilitate the development and secure the implementation of a county-wide comprehensive social service delivery system.

Obtaining Residents' Perspectives: Information Gathering

There are three recommended methods for obtaining a community-wide perspective on the challenges facing families: (1) focus groups, (2) interviews with key informants, and (3) resident surveys. Using a combination of these strategies facilitates the collection of information from different groups of people in a community. It is not necessary to use all three methods to reach every member of the community. Furthermore, limits on time, money, and individual and collective energies make trying to do so impractical.

Regardless of which strategies are used to gather information, the planning team should answer the following questions at the beginning of the information-gathering process:

- Who is conducting the focus group, interview, or survey?
- Why is this information being gathered?
- How will the information be used?
- How will this information benefit residents who participate in this process?

Answering these questions helps all members of the planning team work toward a specific, common goal throughout the process, and ensures that everyone understands his or her part in achieving that goal.

Using a variety of techniques improves the quality of the information gathered in the planning stage, as well as in the subsequent stages of program development, implementation, and evaluation.

Focus Groups

Focus groups are guided discussions with a small group of participants. Focus groups can be used for two purposes: to explore issues in greater detail or to gather information on the needs of special populations within the community. The goal is to use the group dynamic to provoke discussion. Ideally, focus groups give you an opportunity not only to find out what the issues are in the community, but why individuals feel these issues are important.

Focus groups should include a manageable number of selected community members (usually eight to 10 works best), in addition to a facilitator and a recorder, who takes thorough notes or tape-records and transcribes the discussion. Participants in individual focus groups are selected based on their commonality; for example, they may all be working women or adolescent males. Individuals who function well in group discussions should be sought for focus groups. Parents, youth, teen mothers, and teachers typically fall into this category. Conducting focus groups representing a variety of populations may provide information about the entire community. On its own, the perspective of one segment of the population is one slice of the pie. But fitted together, numerous focus groups can give a good description of the whole pie.

Advantages

- Focus groups may surface new issues or questions
- The in-depth conversation held in focus groups can provide rich information
- The group dynamics can help to bring out the different facets of a particular issue
- Focus groups provide an opportunity to follow up on a response and probe why it was given

Disadvantages

- Individuals may be intimidated by the group and not say what they really mean
- The group involved may not be representative of the community
- Analyzing focus group information can often be difficult

Successful Focus Groups

Several factors are essential to successful focus groups:

1. Make the meeting attractive, so that families will attend.
2. Create a climate of openness, so that families will be comfortable and will speak freely about their views.
3. Assure that the focus groups represent families in a large portion of the area to be served, especially those who are likely to be the primary targets of the new program.
4. Ask open-ended questions.
5. Encourage focus group participants to define community strengths, resources, challenges, and concerns in terms that are as specific as possible.

Designing Focus Groups

Take steps to encourage participation.

- In order to secure full participation, residents must understand that their input is valuable and what they say is important. Informing them of the questions before the focus groups meet may encourage participation.
- Community organizations often can help planners structure focus group meetings so that people will attend. they can also identify families to be invited.
- Providing child care, as well as food and transportation, is often critical to getting families with children to attend meetings.

Just as programs and services must be attractive in order to welcome families, so must the initial focus groups—which in many respects introduce the new planning effort to the community—be attractive.

Be realistic about time.

- If you try to pack too much into the focus group you will end up rushing things, and the information you get will not be as rich. Estimate how much time it will take to answer each question before hand—taking into account which questions are likely to provoke more or less discussion.
- Allow a minimum of ten to 15 minutes per question as a rule of thumb. Remember to set aside time for introductions and wrap-up.
- Make sure you are clear with all participants before hand about how long the focus group is expected to take.

Create a comfortable environment.

- Find a "peer host." Participants will be more comfortable if someone they know in the community is involved in hosting and setting up the focus group.
- Leave time for introductions up front. Even if the group members know each other, introductions will be important to establish the relationship between the group members and the facilitator.
- Make sure the focus group is held in an environment where all participants are comfortable.
- Provide food and refreshments.

Create a relaxed and respectful conversational space.

- Set ground rules up front. For people to be comfortable it is important for them to know that what they say will be respected, not only by the facilitator, but also by other participants. Typical ground rules might be: no interrupting, speak for yourself only, you can disagree but not criticize
- Politely enforce ground rules. Sometimes the process gets "out of hand" and people need to be reminded of the rules they have agreed to.
- Make sure everyone gets a chance to speak. Use eye contact and conversational clues to engage people who may be less vocal.

Be appreciative of the time people are giving you.

- Thank everyone up front and afterwards
- Make sure to explain up front why you are collecting this information, how important their participation is, and how this will benefit them and their community—use the background information sheet you created earlier.
- Always be respectful of everyone's contribution and the answers they give.

Remember that the object is to get in-depth responses.

- Be clear up front about what your goals are and don't be afraid to interrupt people to get back on track.
- Double check your questions to make sure that they will provoke more than a yes or no response.
- Be prepared with follow-up questions.
- Live with pauses. Often it can take a few seconds for conversation to get started. While this can feel like an eternity to a focus group facilitator, try not to rush in but to let the pause play out. Often people are just thinking.
- Encourage participants to build on other people's points.

Take time for re-cap and consensus building.

- Remember that in focus groups conversation flows, which means that points will get made that are specifically relevant to the conversation that was had, mainly reflect one person's point of view, or weren't exactly what the person meant.
- Go over what you heard at the end of the focus group in order to give people a chance to react or clarify
- Try to get group consensus on the three most important points that came out of the process

While a written survey in Garrett County, Maryland, identified mental health services as a critical need in the community, a focus group facilitator was able to push participants beyond generalities to define the community's specific needs: family crisis counseling services that were available after 5:00 p.m. during the week and on weekends. The facilitator was then able to identify the population most affected by the need: families with two working parents who could not afford to miss work in order to attend counseling sessions.

Interviews

Key informant interviews are a method of obtaining more in-depth information from community residents and leaders. The goal of an interview is to have a frank discussion of issues affecting residents and their opinions and needs, and to discuss items that people may not be willing to talk about in a focus group. Interviews should be conducted with people in the community who, because they hold certain public positions, have certain professional associations, or have good relationships with families, are particularly important sources of information. From a strategic-planning perspective, key informant interviews are best suited for two types of individuals in the community: those who are uncomfortable participating in group discussions and those who have a tendency to dominate group discussions.

Document 6 is a sample script to use when approaching potential interviewees. This script can be adapted as needed—for example, when planners are approaching potential interviewees for the resource assessment process, which will be addressed later.

In many cases, the very residents who are regularly confronted by community problems (such as single parents and at-risk teenagers) are the most reluctant to participate in focus groups. Key informant interviews are an effective tool for seeking the input and advice of these people, because they can be more flexible and less threatening than focus groups. Interviews are also effective in obtaining the input of easily identifiable public officials, human service professionals, religious leaders, and others who hold strong opinions on community issues, but do not restrain themselves enough to allow others to express their ideas.

Possible Subjects of Key Informant Interviews

- City officials
- Police chiefs
- Church officials
- Public school principals
- Social workers
- Family counselors
- Juvenile court judges
- Lawyers, family physicians
- Pediatricians
- Leaders of women's groups
- Leaders of volunteer organizations
- At-risk teenagers
- Low-income parents

Advantages

- In-person interviews allow for detailed responses to questions.
- Interviews can be inexpensive.
- Interviews allow for clarification of questions and answers.
- Interviewing in person guarantees a high response rate.
- Respondents are less likely to leave a question blank or answer "don't know."

Disadvantages

- Interviews are usually lengthy. Some people may not have time to answer.
- Interviews take a lot of staff time to conduct and transcribe/write out.
- Interviewers must be trained to ask questions in a way that will not bias the answers or elicit yes/no answers.
- Respondents may not be as honest when their answers are not anonymous.

Preparing for Interviews

Respect respondents' time.

- Be clear up front about how long the interview will last.
- If the interview runs over the time allotted, apologize and give an estimate to the respondent about how much longer you will need. If the respondent does not have time to complete the interview then, try to schedule a time to finish it later.
- For individuals with particularly busy schedules, you may want to consider mailing, faxing or e-mailing the questions in advance so they can prepare.

Respect the privacy of respondents.

- Be clear about how the information will be used. Obtain permission to reveal that "a minister" or "a sports coach" responded in a certain way.
- To ensure future privacy of respondents, avoid writing the name or address of the respondents on the same sheet as their answers.

Introduction:

I am calling on behalf of the Focus 2000: Children, Youth, and Family Initiative. The Initiative is trying to provide positive supports and opportunities for children and youth in the Lincoln-Central community. A key goal of the Initiative is to develop a neighborhood family center at Lincoln Elementary School. The center is intended to provide services and activities that will meet the needs and priorities of the community.

Purpose of Call:

As part of the planning for the center, we are asking community residents to identify key issues and concerns confronting children and youth in the Lincoln-Central neighborhood. The information gathered will be used to determine what services should be available through the family center. You have been suggested as a source of important information about the status of families in the neighborhood. I would like to arrange a time to interview you within the next two weeks.

None of your personal opinions will be shared with anyone else. All information collected in interviews will be summarized and presented from a community-wide perspective.

Family Centers:

Family centers vary according to each community's priorities, but all family centers take the approach of *preventing* problems by providing resources and supports to all families. Many family centers provide:

- Life-skills training
- Parent information classes and support groups
- Parent-child groups and family activities
- Drop-in time
- Childcare
- Information and referral services
- Access to social and health services
- Crisis intervention and family counseling
- Screenings and developmental testing

The goal is to create a comfortable place in the community where families can come in order to: access traditional services, receive informal and formal supports, participate in fun activities, develop relationships with neighbors, and have an impact on how services are provided within the community.

Focus of Interview:

The Initiative seeks to make sure that all youths in Columbus have access to a wide range of stimulating, well-structured developmental opportunities. Through interviews we hope to learn from the community what role the center can play to improve the community. I would like to send you the interview questions and arrange a time to meet with you to complete the interview.

Ensure the validity of the interviews.

- Field test your interview questions in advance to insure that questions are clear and understandable.
- Train interviewers to be sure that they are not leading respondents toward particular answers.
- If you are using more than one interviewer, make sure all interviewers are asking questions in the same way, and that all interviewers have the same understanding of the intent of each question.

Prepare your interviewers.

- The interviewer should dress in a fashion similar to that of the respondents to increase respondents' level of comfort.
- The interviewer should establish eye contact and greet the respondent before the interview begins.
- Interviewers should be very familiar with the questionnaire and should practice reading the questions aloud. Interviewers should not stumble over words or phrases, and they should adhere to the exact wording of the questionnaire, with no additions or omissions.
- Prepare interviewers with follow-up questions when respondents do not fully answer a question. The best probes are often silence; respondents often volunteer more after given time to reflect. If necessary, the interviewer can ask, "Anything else?"; "Tell me more"; or "Can you explain that?"
- A script for the interviews should be developed to explain the purpose of the community assessment effort. This script should provide a background of the effort, identify who is participating in the planning, and explain the role of the interviews in the community needs assessment and how the information from the interview will be used by the planning committee.

Surveys

A survey is a pre-determined set of questions used to solicit information. Surveys are used to collect a very broad base of information on the needs, resources and priorities of community members. When carefully designed and conducted, surveys are the most accurate method of gathering information about a community. The anonymity of surveys often allows people to be more honest about personal issues. For example, in interviews and focus groups, adults are rarely willing to say their parenting skills need improvement. In privacy, however, parents are often willing to express their desire to improve their parenting skills.

Surveying residents can help build a program's constituency within a community, but requires careful attention to selecting, training, and deploying culturally competent staff to disseminate the surveys who will be well received in the neighborhoods they will canvass. Potential staff of the proposed community-based program are frequently well suited for this work. This effort to obtain the perspectives of families in the neighborhoods also can be utilized as an outreach tool and a feedback loop for the new program.

Written surveys are successful when they:

1. **Are completed by a broad sampling of residents in the community or geographic area**
2. **Are designed to identify and capture information on the issues confronting residents and the support they need to achieve their goals in life**

Surveys can either be written, or administered orally in person or over the telephone. If surveys are the primary means for obtaining community residents' perspectives, and thus are disseminated in large numbers, families should be selected randomly to reduce the likelihood that segments of the population will be left out. However, written surveys to solicit families' perspectives on their needs may complement focus groups and key informant interviews. In this case, random sampling is not as great a concern, and as few as 50 or 100 well-administered surveys completed by a representative sample can provide a great deal of insight as to what is on families' minds.

Being forthright with residents builds trust and enhances their sense of ownership in the resulting services or programs. A short paragraph can be included on the cover page of the resident survey to share the answers to the above questions with community members. The following paragraph is an example:

"The following survey is being taken by the workers of the Lincoln-Central Neighborhood Family Center in Columbus, Indiana. The answers gathered in this survey are strictly confidential, and the people interviewed will not be identified. The purpose of this survey is to help identify the wants and needs of the families in the Lincoln-Central area, so that we can provide a neighborhood family center that everyone can use. The boundaries of the Lincoln-Central neighborhood are Seventeenth Street and Water Street, and Lawton Avenue and Pennsylvania Street."

Advantages

- Surveys are inexpensive
- Surveys can reach a number of people in the community
- Anonymous surveys can provide a way of getting information that people are unlikely to share otherwise
- Survey responses are often easier to analyze than focus groups and interviews

Disadvantages

- Effective surveys are short, limiting the amount of information you can collect
- Surveying is often a "one-shot deal" with limited opportunities for follow-up
- Survey answers are often brief, providing less rich information than focus groups and interviews

Structuring Survey Questions

Open ended: Open ended questions provide an opportunity to give an unstructured response. An example might be:

> What do you feel is the most important issue in your community today?
>
> _____
> _____
> _____
> _____
> _____
> _____

The advantage of open-ended question is that you get richer, more detailed information, and you can minimize the way in which the question influences the respondent. The disadvantage is that the responses to open-ended questions are often more difficult to interpret and they take more time for respondents to fill out.

Closed ended: In closed ended questions respondents are asked to choose between structured responses. Using closed ended questions generally provides information that is less rich, but easier to analyze. Below we discuss some common structures for closed ended questions.

Multiple Choice: Multiple choice questions provide an opportunity for respondents to choose between a number of possible responses. An example might be:

> Which of the following services would you like to see offered in your community?
>
> ❑ child care ❑ after school activities for adolescents
> ❑ GED classes ❑ job training
> ❑ parenting classes

The advantage of multiple choice questions is that they are easy to analyze and take relatively little time to fill out. The disadvantage is that the responses are constrained by the choices given. In the example above respondents are given the opportunity to fill in a response other than those on the list. However, often respondents are influenced by the list presented to them. It is important to ensure that the list included truly represents the universe of categories that respondents are likely to choose.

Ranking: Ranking allows respondents to make distinctions between a number of choices. For example:

> Of the services below, please rank the one you use most often (1), second most often (2), and third most often (3):
>
> ❑ child care ❑ after school activities for adolescents
> ❑ GED classes ❑ job training
> ❑ parenting classes

Surveying residents involves:

1. **Designing a questionnaire**
2. **Pilot-testing the questionnaire**
3. **Distributing the questionnaire**
4. **Collecting data**
5. **Analyzing the data**

Documents 7 and 8 are sample surveys.

Documents 9, 10, 11, and 12 provide a means of tracking the planning team's work as they implement the information-gathering methods described above.

Rankings are a little harder to analyze than multiple choice questions, because you need to take into account not only the number of individuals making a choice, but also the ranking which they gave the choice. Still, rankings help to provide clear information that is easy to analyze. As with multiple choice, it is important to ensure that the list devised is truly exhaustive.

Ranges: Another type of multiple choice question asks respondents to choose between mutually exclusive ranges. For example:

How many times have you visited the doctor in the last 3 years?

❑ 0 ❑ 1-3 ❑ 4-6 ❑ 7-9
❑ more than 9

Ranges can be particularly useful for asking about sensitive issues such as income, where the respondent may be reluctant to give an exact figure. Ranges are easy to tabulate, and can be particularly useful when you are more interested in the number of individuals in a certain group, such as families with children under age 3, than in a specific figure like the average age of individuals responding.

True/False: In true/false questions participants are asked to agree or disagree with a statement. For example:

	True	False
Staff listen to what I say.	❑	❑

The advantages of true/false questions is that they are easy to analyze and answer. The disadvantage is that responses are highly constrained by the questions listed, and there are no gradients to the response.

Scaled Questions: Scaled questions also provide an opportunity for respondents to respond to a statement, but give a broader range of possible responses to choose from. A common form of scaled questions are Likert scales. Likert scales allow respondents to choose the level of response that best fits their opinion. Thus, answers more accurately represent how respondents actually feel. Two examples of scaled questions are below:

I look forward to coming to the Family Center.

❑ Strongly Agree ❑ Agree
❑ Disagree ❑ Strongly Disagree

I find the community parenting classes:

❑ Very Useful ❑ Somewhat Useful
❑ Not Very Useful ❑ A Waste of Time

Important Survey Issues

Field testing: Before distributing your questionnaire, you will need to work out the bugs. Identify 10 to 20 individuals who could be in your respondent pool. Have them fill out the questionnaire and help you identify areas which may be a problem when you actually use the tool in the field.

Length: When designing a questionnaire, it will be important to consider both the physical length of the questionnaire and the amount of time that it takes to fill out. The shorter the questionnaire, the better your response rate is likely to be. Using closed ended questions significantly reduces the time it will take a respondent to fill out your questionnaire. During you field test make sure to note the amount of time it takes for individuals to fill out the questionnaire and ask questions about whether the length is appropriate.

Language: Make sure that your questionnaire is written in language that is easily understandable by respondents. Avoid obscure terms, unclear wording, or unnecessarily large words. In your field testing process, ask respondents to circle any word or phrase that they find unclear or difficult to understand. If a significant portion of the respondent population primarily speaks primarily language other than English, make sure that you get your questionnaire translated and field test this version as well.

Ease: Questions should be easy for individuals to answer without doing calculations, checking records, or consulting with others. Remember that the more work it is for a respondent to answer a question, the more likely it is that you will either not get a response, or will only get the respondent's "best guess." For example, one questionnaire asked teenagers to write down the number of miles they had driven since receiving their driver's license. Since most people do not keep track of mileage, respondents were forced to guess, and some teenagers reported driving hundreds of thousands of miles.

Sensitivity: The more sensitive a question is, the less likely that you will get a completely honest response, or any response at all from respondents. People may just not want to tell you how much money they make, how long they've been unemployed, or what their sex lives are like. Residents are more likely to answer sensitive questions if they are confident that their answers are completely anonymous. Design your survey with no identifiable markings so that respondents will not have a reason to be suspicious that you can trace their answers to them.

Layout: Make sure that your questionnaire is easy to read, contains a lot of white space, contains ample room for people to respond to open ended questions, and is engaging and attractive to look at. Don't try to make it shorter by picking a type font that is difficult to read. Do spend some time and energy up front making sure that it looks good. People's first impressions may affect whether or not they fill it out.

Introduction: As with all the information-gathering mechanisms proposed, it's important that respondents are clear on why the information is being collected, what it will be used for, where and when they can get copies of the final results, and why it is important for them and their community. Be clear, be creative, use plain language, use graphics. Remember that your cover page may make all the difference between whether or not your survey gets filled out.

Getting it out: The easiest way to get a survey out is by mail. Distributing surveys by mail, however, can two disadvantages. First, mailing costs can get expensive depending on the size of the community. Second, the survey may get thrown out with the junk mail. Surveys can be distributed by hand—either door-to-door or in designated community locations. Surveys can also be sent home with school children, distributed in waiting rooms, or made available at community institutions like libraries or grocery stores. When deciding how to distribute your survey the primary question you need to ask is—who needs to get this? If you need information to design family center services targeted toward families with school aged children, then disseminating it through the schools may be okay. If you're trying to reach all families in the community, only disseminating through the schools may limit you. Remember that you can use multiple dissemination methods—if you do, however, make sure that you are clear that each individual should only fill out *one* survey!

Door-to-door delivery provides an additional opportunity to tell residents that their input is valuable and to offer personal encouragement.

Getting it back: The easiest way to get your survey back is to enclose a pre-stamped, pre-addressed envelope, however, this can be expensive. Other ways to get the survey back include: asking school children to bring it back from home, creating community drop-off places, or using raffles or gifts. The way you get it back will affect whose information you get. Be creative!

Representativeness: If the community you are surveying is at all diverse, you want to ensure that you have actually surveyed a representative group of the community. It is a good idea to include a few demographic questions on the survey so that you know who is responding and whether or not your results can be generalized to represent the entire community. You may find that you need to alter your questionnaire or your survey methods if you find that one age group, ethnicity, or gender has been excluded or is not responding.

Additional questions to guide the development of a survey are provided in the appendix.

Focus 2000: Children, Youth, and Family Initiative Lincoln-Central Neighborhood Columbus, IN

1. In your own words, identify the three most urgent needs in the neighborhood.
   1. _____
   2. _____
   3. _____

2. If services and activities were offered at your area neighborhood family center, would you attend?
   ❑ Yes ❑ No

   If yes, what services and activities would you like to see offered?
   1. _____
   2. _____
   3. _____

3. What reasons would keep you from attending services and activities at the neighborhood family center?
   ❑ Cost
   ❑ Transportation Why? _____
   ❑ Childcare Why? _____
   ❑ Time What time is best? _____
   ❑ Other _____

4. What would be the best way to communicate what is happening at the center?
   ❑ Flyers ❑ Word of mouth ❑ Cable TV
   ❑ Posters ❑ Radio ❑ Newspaper

5. When you and/or your child (if you have children) get sick and need medical care, where do you go?
   ❑ Family doctor ❑ Emergency room
   ❑ Health clinic ❑ Other _____

6. If you have children in school, how often do you visit the school?
   _____

   If you do visit the school, what do you think of the way your child is being taught, and of the activities for him/her?
   _____
   _____
   _____

7. Name three problems or concerns that you feel have an impact on your community or family.
   1. _____
   2. _____
   3. _____

1. What categories describe you? (Check all that apply.)

- ❑ Parent
- ❑ Teenager
- ❑ Grandparent
- ❑ Other: _____
- ❑ Clergy
- ❑ Childcare provider
- ❑ Business person
- ❑ Teacher
- ❑ Health care provider
- ❑ Service Provider (describe): _____

2. Please indicate the community in which you live.

- ❑ Bishops Head
- ❑ Cambridge
- ❑ Capri
- ❑ Church Creek
- ❑ Crocheron
- ❑ East New Market
- ❑ Madison
- ❑ Rodesdale
- ❑ Taylors Island
- ❑ Toddville
- ❑ Wingate
- ❑ Woolford
- ❑ Other: _____

3. Please indicate your community's three most significant strengths. (Check only three.)

- ❑ Religious involvement
- ❑ School involvement
- ❑ Community group involvement
- ❑ Neighborhood involvement
- ❑ Family togetherness
- ❑ Supportive relatives
- ❑ Safety
- ❑ Health
- ❑ Transportation
- ❑ Drug-free
- ❑ Recreation
- ❑ Housing
- ❑ Childcare
- ❑ Employment
- ❑ Alcohol-free
- ❑ Other: _____

4. In which of the following areas do children and families in your community face the greatest challenges? (Check only three.)

- ❑ Safety
- ❑ Vocational training
- ❑ Mental health
- ❑ Child abuse
- ❑ Alcohol
- ❑ School dropout
- ❑ Housing
- ❑ Employment
- ❑ Illegal drugs
- ❑ Teen pregnancy
- ❑ Child day care
- ❑ Physical health
- ❑ Delinquency
- ❑ Other: _____

For each item you checked, please indicate why:

_____

_____

_____

5. Are there any populations of special concern in your community?

- ❑ Teenagers
- ❑ Elderly
- ❑ Children
- ❑ Single parents
- ❑ Parents
- ❑ People with disabilities
- ❑ Infants
- ❑ Unemployed
- ❑ Other: _____

6. Please indicate how adequate the following services for children and their families are in your community.

4 = Excellent 3 = Good 2 = Poor 1 = Not Available 0 = Don't Use

_____ Childcare and development	_____ Child welfare and foster care
_____ Community and church organizations	_____ Criminal justice
_____ County planning and zoning	_____ Crisis intervention and counseling
_____ Culture and art	_____ Education, literacy, and mentoring
_____ Assistance for handicapped people	_____ Employment and training
_____ Family services and counseling	_____ Family support
_____ Physical health	_____ Mental health
_____ Information and referral	_____ Legal aid
_____ Recreation	_____ Substance abuse treatment
_____ Transportation	_____ Youth clubs
_____ Emergency assistance: food, clothing, shelter, and energy	_____ Other: _____

7. What do you consider to be the barriers that prevent families from receiving the services they need? (Check all that apply.)

- ❑ Not aware of existing services
- ❑ Agency is too far away from people's homes
- ❑ Agency is not open at convenient times
- ❑ Staff do not speak consumers' language
- ❑ Rules and eligibility exclude people who need services
- ❑ Staff are rude or not sensitive to consumer needs
- ❑ Staff do not seek or listen to consumer input about improving services
- ❑ Waiting lists are too long
- ❑ Transportation is not available
- ❑ Day care is not available
- ❑ Agencies' fees are too high
- ❑ Agency does not provide clear information about services available
- ❑ Other: _____

8. Who or where do you turn to for help most often? (Check all that apply.)

- ❑ Clergy
- ❑ Health care provider
- ❑ Friend
- ❑ Teacher
- ❑ Family
- ❑ Co-worker
- ❑ Social service provider (indicate which one): _____
- ❑ Other: _____

9. What are your family's greatest hopes for the future? _____

_____

_____

_____

_____

_____

_____

Understanding Community Needs: Analyzing the Data

Each of the three methods of gathering information described above will provide insights on specific challenges and issues that may not be indicated by the "hard" data in a community profile. Having collected this "soft," qualitative information from community residents, the planning team should be ready to create a prioritized list of community interests that should be addressed in the larger community planning effort.

Analysis of Focus Group Data

Planners must ensure that the analysis of data collected from focus groups is systematic and verifiable. The process is systematic when it follows a prescribed and sequential format. It is verifiable when a person outside the team responsible for analyzing the data can reach the some conclusions using the same data. For this reason, it is important that all planners analyzing focus group data do so in the same way. It is recommended that those analyzing the data format their analysis in such a way that they can provide the information and answer each of the questions at right. This information should comprise the focus group subcommittee's report to the planning team.

Report on Focus Group Data

1. Top three to five strengths or resources of the community
2. Top three to five challenges or concerns of the community
3. For each top challenge or concern, how aware are residents about resources currently available in community?
4. For each top challenge or concern, what barriers to services exist, according to residents?
5. For each top challenge or concern, what solutions are most appropriate, according to residents?

The focus group's facilitator and recorder should concentrate their efforts on identifying the subjects on which participants held the strongest opinions or strongly agreed with each other. The facilitator and the recorder should also seek to identify opinions, ideas, and feelings that were repeated throughout the focus group, even those that were expressed in different words and styles by different participants. The final written report should reflect which issues were emphasized in the discussion.

Too often, the analysts of focus group data are overwhelmed by the vast accumulation of data. The key element to analyzing the outcome of focus groups is to always keep in mind the ultimate purpose of the assessment process: to better understand the current well-being of families and their community. The analysis therefore should be limited to accomplishing this goal.

Analysis of Interview and Survey Data

In most cases, the process described above can be used to analyze data from key informant interviews and resident surveys. The greatest challenge in organizing and analyzing these types of data, however, is to make the process straightforward and comprehensible for the average person. For this reason, tabulation is the most effective method. The major task involved in preparing for tabulation is to develop a tally sheet on which the persons analyzing the data will record each survey respondent's or interviewee's answer to each question.

The analysts can then use these tally sheets to calculate the full range of answers and the frequency of any answer. The full range demonstrates the diversity of thinking in the community, and the frequency of answers indicates the severity of a given challenge or concern to the community as a whole.

That said, the tabulation of answers to open-ended (or unstructured) questions is slightly different than the tabulation of closed-ended (or structured) questions. While tabulating open-ended questions can be time-consuming, steps can be taken to streamline the process, which is particularly important if there are a large number of surveys or interviews to tabulate.

Let us assume that a community has to analyze 150 surveys. The analysis team should begin by taking the following steps with regard to each open-ended question:

1. Draft a table that consists of 30 slots.
2. Enter the answers to the question from 30 random surveys, one to each slot.
3. Draw lines to connect common or like answers.
4. Designate a keyword to describe each category formed by the consolidated answers.

Through this process (illustrated by tables 4.1 and 4.2) the team has created a list of approximately 15 (depending upon how much consolidation was possible) general categories into which they can place all answers to this question. Now, the team can list these 15 or so answers in a new table. The team can then easily go through all 150 surveys, one question at a time, and document the number of times each answer has been given (see table 4.3). Sometimes a small number of additional answers emerge in the course of the team's tallying. When and if this happens, the analysis team must simply keep track of these responses in case an unexpected pattern develops. This is not a significant problem and should not be given a great deal of attention.

Closed-ended data is much easier to tabulate, because the number of answers that a respondent can give is limited. The answers can be tallied in the way illustrated by tables 4.4 and 4.5 if the survey contains questions that respondents answer by designating a rating (4.4) or by assigning a numerical ranking (4.5).

Tally sheets can also be used to tabulate answers that respondents have chosen from a list not of rankings, but of other statements (see table 4.6). Such survey questions could, for example, ask respondents to choose three positive characteristics that define the community from a list of positive characteristics, to choose the number-one concern of families with children aged zero to six from a list of concerns, to choose the youth development service most needed for youth aged six to 12 from a list of services, or to choose the number-one challenge facing high school graduates entering the labor force from a list of challenges.

When the answers to each question have been tallied, the totals can then be used to describe findings, which can be presented as raw numbers, averages, or percentages, or a combination thereof. For example: 45 percent of respondents indicated that childcare and child development services were "good," but only 10 percent viewed them as "excellent." These findings can be placed on a master sheet that summarizes all of the information obtained from the surveys or interviews in a small amount of space. The totals, averages, and percentages will document the interests, concerns, and feelings of community residents. This information will go a long way in defining the service priorities for the community.

The interview and survey subcommittees should include the following information and answer the final question in their report to the planning committee:

1. **Top three to five positive characteristics of community**
2. **Top three to five strengths of families in the community**
3. **Top three to five challenges or concerns confronting residents**
4. **Top three to five community services, programs, or agencies that residents utilize most**
5. **Top three to five service barriers**
6. **For each top challenge or concern, what solutions are most appropriate, according to residents?**

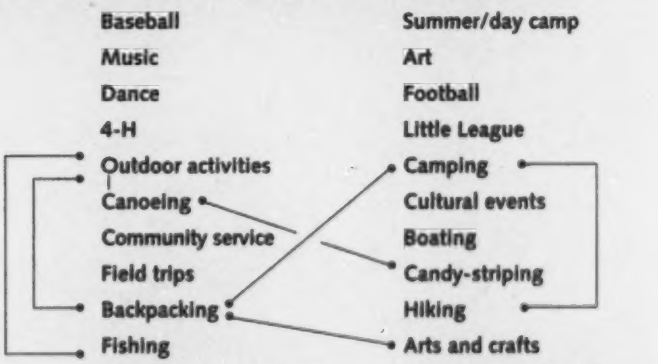
The formats of the interview and survey may limit planners' ability to include interviewees' and survey respondents' insights on the connections between concerns and service barriers, and between concerns and availability of services; and their ideas on community strengths that can be built upon to address community challenges and concerns. During the next phase of the community assessment, planners will work with residents and service providers to identify the strengths upon which the community and its residents can build to address their concerns, and will determine the extent to which the community's system of informal and formal services has the capacity to support the healthy development of children and families.

Tables 4.1–4.3 Open-Ended Survey Question

Table 4.1 Consolidating the Answers

Question: What youth services or forms of recreation do you think children in the neighborhood could benefit most from?

Answers given on 30 randomly chosen surveys:



Lines show some of the possible consolidations. Others include: Community service, Volunteering, Candy-striping; 4-H, Boy Scouts and Girl Scouts; Baseball, Football, Little League

Table 4.2 List of Consolidated Answers

(Listed by Keyword)

Sports
Music
Dance
Outdoor Activities
Organized Youth Clubs
Mentoring
Boating
Community Service/Volunteering
Cultural Events
Arts & Crafts
Debating
Summer/Day Camp
Summer Job Program
Camping/Hiking
Field Trips

Table 4.3 Frequency of Answers

Answers	5	10	15	20	25	30	35	40
Sports	𝍸	𝍸	𝍸	𝍸	𝍸	𝍸	|||	
Music	𝍸	𝍸	||					
Dance	𝍸	𝍸						
Outdoor Activities	𝍸	𝍸	𝍸	𝍸	||||			
Organized Youth Clubs	𝍸	𝍸	𝍸	𝍸	|||			
Mentoring	𝍸	||						
Boating	𝍸	𝍸	𝍸	𝍸				
Community Service & Volunteering	𝍸	𝍸	|||					
Cultural Events	𝍸	𝍸	||					
Arts and Crafts	𝍸	|||						
Debating	𝍸	𝍸	𝍸	||				
Summer/Day Camp	𝍸	𝍸	𝍸	|				
Summer Job Program	𝍸	𝍸	𝍸	𝍸	||			
Camping/Hiking	𝍸	𝍸	𝍸	|				
Field Trips	𝍸	𝍸	𝍸	𝍸	|			

Table 4.4 Closed-Ended Survey Question: Rating

Please indicate the adequacy of the following services for children and families in your community.

Service	Excellent	Good	Poor	NA	Don't Use
Childcare and Child development	10	10	5	10	5
Child welfare and foster care					
Community and church organizations					
Criminal justice					
County planning and zoning					
Culture and art					
Education, literacy, and mentoring					
Emergency assistance: food, clothing, shelter, and energy					
Employment and training					
Family services and counseling					
Family support					
Physical health					
Mental health					
Information and referral					
Legal aid					
Recreation					
Substance abuse treatment					
Transportation					
Youth clubs					
Assistance for handicapped people					
Other (specify):					

Example:
10 respondents said childcare and child development services were excellent

10 . . . . . good

5 . . . . . poor

10 . . . . . not available

5 respondents said they did not use childcare and child development services

Table 4.5 Closed-Ended Survey Question: Ranking

Rank the following community concerns in order of priority, 1 being the highest-priority concern.

Step 1: Add Up the Responses

For each concern, count the number of respondents who ranked the concern 1st, 2nd, 3rd, etc. For example, the table below shows that thirty-three respondents ranked Crime/Gangs 1st, seven respondents ranked it 2nd, four ranked it 3rd, ... and six ranked it 8th.

Concern	1st	2nd	3rd	4th	5th	6th	7th	8th
Crime/Gangs	33	7	4	7	3	5	6	6
Drug/Alcohol Abuse	3	19	13	12	5	6	7	6
Housing	4	9	10	9	18	4	4	12
Jobs/Employment Skills	14	10	16	12	11	6	1	1
Parenting Skills/ Life Skills	3	8	6	5	11	10	18	9
Positive Youth Activities	0	6	5	7	8	12	16	19
Public Education	9	4	9	13	6	16	6	8
Teen Pregnancy	5	8	8	6	9	12	13	10

Step 2: Weight the Responses

For each concern, multiply the number of respondents who ranked the concern 1st , 2nd, 3rd, etc., by a "weighted" value for each ranking: in this case, an 8th-place ranking is worth one point, a 7th-place ranking gets two points, ... and a 1st-place ranking gets eight points.

In the table below, the figures in parentheses represent the weighted rankings. For example, the category Crime/Gangs was ranked 1st by thirty-three respondents; that number multiplied by eight points gives a total of 264 points.

Next, add up the number of points earned by each concern, including all rankings, to get that concern's weighted total.

The category Crime/Gangs, for example, received a weighted total of 417 points (264 + 49 + 24 + 35, etc.).

Concern	1st	2nd	3rd	4th	5th	6th	7th	8th	Total
Crime/Gangs	33 (264)	7 (49)	4 (24)	7 (35)	3 (12)	5 (15)	6 (12)	6 (6)	- [417]
Drug/Alcohol Abuse	3 (24)	19 (133)	13 (78)	12 (60)	5 (20)	6 (18)	7 (14)	6 (6)	- [353]
Housing	4 (32)	9 (63)	10 (60)	9 (45)	18 (72)	4 (12)	4 (8)	12 (12)	- [304]
Jobs/Employment Skills	14 (112)	10 (70)	16 (96)	12 (60)	11 (44)	6 (18)	1 (2)	1 (1)	- [403]
Parenting Skills/ Life Skills	3 (24)	8 (56)	6 (36)	5 (25)	11 (44)	10 (30)	18 (36)	9 (9)	- [260]
Positive Youth Activities	0 (0)	6 (42)	5 (30)	7 (35)	8 (32)	12 (36)	16 (32	19 (19)	- [226]
Public Education	9 (72)	4 (28)	9 (54)	13 (65)	6 (24)	16 (48)	6 (12)	8 (8)	- [311]
Teen Pregnancy	5 (40)	8 (56)	8 (48)	6 (30)	9 (36)	12 (36)	13 (26)	10 (10)	- [282]

Step 3: Sort the Results

Rank each category from lowest to highest based on the total weighted ranking arrived at in Step 2. The concern with the most points will have the highest ranking, and the one with the fewest points will have the lowest ranking.

Concern	Ranking	Weighted Total
Crime/Gangs	1st	417
Jobs/Employment Skills	2nd	403
Drug/Alcohol Abuse	3rd	353
Public Education	4th	311
Housing	5th	304
Teen Pregnancy	6th	282
Parenting Skills/Life Skills	7th	260
Positive Youth Activities	8th	226

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Table 4.6 Multiple-Choice Question

What are your community's most significant strengths? (Check 8)

_____ Religious involvement	_____ Transportation
_____ School involvement	_____ Drug-free
_____ Community group involvement	_____ Recreation
_____ Neighborhood involvement	_____ Housing
_____ Family togetherness	_____ Childcare
_____ Supportive relatives	_____ Employment
_____ Safety	_____ Alcohol-free
_____ Health	

Frequency of Answers

Answers	5	10	15	20
Religious involvement	𝍸	𝍸		
School involvement	𝍸	𝍸	𝍸	
Community group involvement	𝍸	𝍸	𝍸	
Neighborhood involvement	𝍸	𝍸	𝍸	𝍸
Family togetherness	𝍸	𝍸		
Supportive relatives	𝍸	𝍸	𝍸	
Safety	𝍸	𝍸		
Health	𝍸	𝍸	𝍸	
Transportation	𝍸	𝍸	𝍸	
Drug-free	𝍸			
Recreation	𝍸	𝍸	𝍸	
Housing	𝍸	𝍸		
Childcare	𝍸			
Employment	𝍸	𝍸		
Alcohol-free	𝍸	𝍸		

Steps to Get You Started

To begin to conduct an analysis of community challenges, planners can answer these questions:

- **Which techniques will be used to solicit input from the community?**

Focus Groups

- **What groups should be targeted?**
- **In what settings or at what locations should focus group meetings be held?**
- **Who should host the meetings?**
- **What list of questions will be asked?**

Key Informant Interviews

- **What individuals should be targeted?**
- **Who will conduct the interviews?**
- **What form of questions will be used?**
- **Has an interview script been created?**
- **What outreach efforts will be necessary to interview "hard-to-reach" individuals?**

Resident Surveys

- **What groups or areas should be targeted?**
- **What process should be used to randomly select individuals to complete the survey?**
- **How many residents should receive the survey?**
- **What questions should be asked?**
- **Will the residents understand why they are being asked to fill out the surveys and what effect their responses will have?**
- **Are the questions to be used in the various methods of gathering information consistent?**
- **Should the information gathered earlier to create a community profile be shared during any or all focus group meetings, or interviews, or be included in resident surveys?**
- **Should participants in different focus groups be brought together for discussion?**

5

Assessing Community Resources

The purpose of this portion of the community assessment is to identify community strengths and assets. The resources assessment process is aimed at identifying informal and formal resources upon which to build. This is a key step in preventing the duplication of services, establishing key linkages in the community, and creating the critical mass by which new services can have impact. Assessing community resources is part of moving away from deficit-oriented health and social service programming and toward a strengths-based approach.

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Too often assessment processes focus only on the needs of the community, ignoring the assets and resources already working to meet those needs. Resource assessment is a crucial step in the community assessment process.

The planning team should seek to determine:

1. What services are in place to contribute to the optimal development of children and their families
2. What services are in place to prevent the development of problems
3. What community needs or problems are being addressed by the current system

Resource assessment provides the information that will be needed to ensure that:

- existing resources are really "on target," i.e. addressing the needs and priorities of community members
- residents are knowledgeable about existing resources
- formal and informal resources are coordinated, non-duplicative, and are supporting each other
- existing services are not underutilized nor overwhelmed

Resource assessment information should focus on both the informal and formal resources in the community, and should provide information that is detailed enough to inform later decisions about service coordination and the integration of formal and informal resources into a comprehensive support system for families.

The resource assessment process proposed includes three strategies:

Document 13 provides an effective way to organize the information described above with regard to the full range of supportive services.

Provider Surveys

Provider surveys determine the capacity of the agencies and social service providers in the community. These surveys should provide detailed information not only on what providers exist in the community, but also the type of services they provide, the number of slots within each service type, and the current utilization of existing services.

Agency	Planning Team Member Responsible	Date Contacted	Information Collected	Date Follow-Up Made

Consumer Surveys

Consumer surveys provide information about existing services from the consumer's point of view. They help to indicate which services people do and do not use, and why.

Association Surveys

Association surveys provide information on the capacity of informal organizations in the community: church groups, block clubs, neighborhood organizations. These informal organizations are valuable community resources, but are often overlooked in traditional assessment processes.

As with the process of identifying resident perspectives, these three information gathering strategies are meant to be used together to provide a complete picture of the resources and assets of the community.

Provider Surveys

Provider surveys are used to collect information on the agencies and service providers currently in the community. In order to be useful, this information needs to be detailed enough to determine where there are gaps in services, where services are duplicated, and where services need to be coordinated better. It is important for communities to recognize not only what services they have, but also the extent to which these services can reach all the families that might need them and the extent to which additional resources are required. In general, the following steps are used to assess the formal service system:

Designing

Provider surveys should answer the following questions:

- Whom (broken down by gender, race, and age) do they serve?
- What services do they provide?
- How many individuals and families do they serve?
- When (which days and hours) do they provide services?
- At what site(s) do they provide services?
- What geographic areas do they serve?
- What is the composition (in terms of gender, race, and training and education) of the staff?
- What are the eligibility requirements for services?
- What is the cost of services to those served?
- What is the provider's maximum service capacity?

Survey Questions for Formal Service Providers

- Whom (broken down by gender, race, and age) do they serve?
- What services do they provide?
- How many individuals and families do they serve?
- When (which days and hours) do they provide services?
- At what site(s) do they provide services?
- What geographic areas do they serve?
- What is the composition (in terms of gender, race, and training and education) of the staff?
- What are the eligibility requirements for services?
- What is the cost of services to those served?
- What is the provider's maximum service capacity?

Again, there will be a tension between getting detailed information and keeping the survey short in order to get more responses. In general, it is our experience that it is more useful to get detailed information back from a few agencies then to get generic information back from many. A sample provider survey is included in this packet.

Supplying Accompanying Information

Your provider survey should include a cover page with introductory information on:

- The goals of the larger initiative
- Why provider information is being collected
- How the information connects to the rest of the assessment
- How the information will be used (both specifically the information from the provider survey and the information from the larger assessment)
- Why providers should be a part of this process
- How and when the information will be shared

Pilot-testing

As with resident surveys, it will be important to pilot test the survey to make sure that all terms are clear and questions are understandable. Again, if significant changes are needed after a first pilot test a second pilot test may be needed.

Identifying Service Providers

If there is an existing directory of service providers this is the first place to start. Often United Ways or community planning bodies keep lists of community organizations. Additionally community organizations that do a lot of resource and referral often keep informal resource directories for their staff to use. If agency directories exist, you will want to check what other information is included on the organizations in the directory. Using pre-existing information means that your survey can be that much shorter. Often planning team members (who are both service providers and service consumers) also may have a good sense of services in the community as well as some of the individuals that you did key informant interviews with. Finally, there is always the Yellow Pages for finding sources.

Documents 14 is a cover sheet to use when distributing surveys.

Contacting Providers

Before sending the survey it will be important to begin building relationships with community-based providers of services and support. After providers are identified using the methods described above, the director of each agency should be contacted. This contact serves a two-fold purpose: to inform them of the planning effort and of the potential to join a network of service

Documents 15 is a sample of a survey that can be mailed to providers and then followed up with an interview. If an interview is conducted, the sample script provided in chapter four can be adapted accordingly.

Status Record: Information-Gathering Strategies

Strategy	Planning Committee Member Responsible	Other Community Partners	Location(s)	How Many Done	Date Due Out	Date Due In	Date Report Due
Surveys							
Focus Groups							
Interviews							

Status Record: Resident Surveys

Planning Committee Member Responsible	Other Community Partners	Location(s)	How Many Done	Date Due Out	Date Due In	Date Report Due

Status Record: Focus Groups

Planning Committee Member Responsible	Other Community Partners	Location(s)	How Many Done	Date Due Out	Date Due In	Date Report Due

Status Record: Key Informant Interviews

Planning Committee Member Responsible	Other Community Partners	Location(s)	How Many Done	Date Due Out	Date Due In	Date Report Due

Cover Sheet for Survey

Those of us who live and work in (community) need to come together to ensure the health and well-being of the children and families in our community! (Name of collaboration) is a collaboration of health providers, community stake holders, and local residents united around the idea that health promotion and wellness is a community effort. As the first step in our effort we are conducting a community assessment to help us better understand the assets, needs, and priorities of the community. The findings from this assessment will be the foundation for a coordinated effort to better work together and meet the needs of our community. The assessment includes the following components:

- Surveys, interviews, and focus groups with community residents
- A survey of community social services providers
- A survey of the organizations and groups which provide informal resources to the community
- The collection of statistical data on the well-being of the community.

As part of this assessment process, we are asking that (staff members or participants) from your organization fill out the following survey. The information gathered in this survey will be used to support coordinated planning, and to strengthen our database for community referral.

Section I. Description of Organization, Clients, and Services

1. Name of Agency _____

2. Street Address of Agency (list actual address and major cross streets) _____

_____

3. Street Address of Other Service Sites (list actual address and major cross streets) _____

_____

4. Mailing Address (if different from above) _____

5. Contact Person(s) for Agency _____

Name _____ Phone _____

Title _____

Other(s) _____ Fax _____

E-mail address for contact or agency _____

6. Type of Agency

Please circle the responses that best describe your agency.

01 Childcare and child development
02 Child welfare/foster care
03 Community organization/advocacy
04 Crisis intervention/counseling
05 Culture and arts
06 Education/literacy/mentoring
07 Emergency food/clothing/shelter
08 Employment and training
09 Family service/counseling
10 Law Enforcement
11 Health—Physical
12 Health—Mental
13 Information and referral
14 Legal aid counseling/service
15 Multi-purpose community center
16 Recreation
17 Substance abuse prevention and treatment
18 Youth development
19 Faith community
20 Senior services
21 Other _____

If you circled more than one response, please rank them in priority and explain briefly:

_____

_____

Is your agency: ❑ For-profit ❑ Not-for-profit ❑ Government

How long has your agency existed? _____

7. Hours of Operation

What are your agency's hours of operation?

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	

8. Are your facilities wheel chair accessible?_____

9. What languages are spoken by your staff? _____

10. What public transportation serves your agency?_____

_____

11. Do you provide transportation for families?_____

12. Do you provide child care for families? _____

Section II. Characteristics of Clients Served by Your Agency

13. How many clients meeting the following descriptions did your agency serve during the last calendar year? (When an accurate count is not available, your best estimate is acceptable.)

A. Gender

❑ Male ❑ Female

B. Age

❑ 0–4 yrs ❑ 20–34 yrs
❑ 5–9 yrs ❑ 35–54 yrs
❑ 10–14 yrs ❑ 55–64 yrs
❑ 15–19 yrs ❑ 65 and older

Section III. Description of Services and Service Needs

Questions in this section address the availability of services specifically for children and their families. Refer to the list of definitions found at the end of this survey.

14. Services Provided by Your Agency

Indicate whether your agency or organization provides the following services:

	Yes	No	# of Slots
A. Outreach, identification, and referral	❑	❑	_____
B. Linkage to public assistance	❑	❑	_____
C. Case management/service coordination	❑	❑	_____
D. Housing assistance	❑	❑	_____
E. Transportation	❑	❑	_____

	Yes	No	# of Slots
F. Adult education	❑	❑	_____
G. Employment assistance	❑	❑	_____
H. Childcare and child development	❑	❑	_____
I. Youth development	❑	❑	_____
J. Foster care	❑	❑	_____
K. Health care	❑	❑	_____
L. Health promotion programs	❑	❑	_____
M. Mental health	❑	❑	_____
N. Family counseling and support services	❑	❑	_____
O. Services for children and adults with special needs	❑	❑	_____
P. Alcohol and other drug abuse prevention and treatment	❑	❑	_____
Q. Literacy	❑	❑	_____
R. Alternative Health Care	❑	❑	_____
S. Parenting education	❑	❑	_____
T. Crisis intervention	❑	❑	_____
U. Civil rights and legal services (no definition provided)	❑	❑	_____
V. Recreation (no definition provided)	❑	❑	_____
W. Dental	❑	❑	_____
X. Vision Care	❑	❑	_____
Y. Services for gays, lesbians and transgender individuals	❑	❑	_____
Z. Senior services	❑	❑	_____
AA. Adult day health care	❑	❑	_____
BB. Emergency Care	❑	❑	_____
CC. Other	❑	❑	_____

15. What forms of payment do you accept for services?

❑ Privately insured ❑ Medicare ❑ MediCal ❑ Uninsured ❑ General Relief

16. Do you provide services on a sliding fee scale? _____

17. Barriers to Service Delivery

Listed below are barriers that may prevent children, youth, and families from receiving needed services. In your view, how often do these barriers arise for families accessing the services your agency provides?

6 = Always 5 = Usually 4 = Sometimes 3 = Rarely 2 = Never 1 = Don't Know

Barrier	Response
a. Length of waiting lists	_____
b. Agency location	_____
c. Hours of operation	_____
d. Childcare availability	_____
e. Service fee	_____
f. Qualifying rules and eligibility criterion	_____
g. Lack of knowledge	_____
h. Lack of awareness of services offered	_____
i. Staff sensitivity	_____
j. Language	_____
k. Transportation	_____
l. Need for case management/follow-up	_____
m. Literacy issues	_____
n. Immigration status and related issues	_____

Section IV. Perception of System

18. Please respond to the following statements about the health and social services system in (community).

6 = Always 5 = Usually 4 = Sometimes 3 = Rarely 2 = Never 1 = Don't Know

	Response
a. Children and families receive adequate services as needed	_____
b. Programs reach all children and families who need them	_____
c. Services are easily accessible to families	_____
d. Services for children and families are well coordinated	_____
e. Agencies share information and resources	_____

6 = Always **5 = Usually** **4 = Sometimes** **3 = Rarely** **2 = Never** **1 = Don't Know**

	Response
f. Referrals are shared between agencies	_____
g. Interagency meetings occur	_____
h. There is joint planning among agencies	_____
i. There is problem solving among agencies to fill gaps in services	_____
j. Agencies make children and families a very high priority	_____
k. Agencies are in conflict with one another	_____
l. Agencies have conflicting rules and eligibility requirements	_____
m. Duplication of services is a problem	_____
n. Children and families face barriers to obtaining services	_____
o. Providers have adequate information about policy and program changes	_____

19. What three actions would best improve our service system in (community)?

Definitions for Use in Section II

A. Outreach, Identification, and Referral
Systems that identify children and families in need of services and assure that referrals are made to connect families with the appropriate services.

B. Linkage to Public Assistance
Assistance to families in obtaining public financial aid including TANF, food stamps, medical assistance, unemployment compensation, Supplemental Security Income, WIC, public housing assistance, energy assistance, and other supplemental assistance.

C. Case Management/Service Coordination
Activities carried out by a case manager/service coordinator to assist children and families in receiving needed services. This includes coordinating services across agency lines and advocating for unmet needs.

D. Housing Assistance
Programs that provide families with relocation, rent assistance, weatherization, household improvement, and homelessness services.

E. Transportation
Programs that provide transportation to needed services, at little or no cost. This includes providing reimbursement for travel costs.

F. Adult Education
Classes include public education, GED programs, literacy programs, ESL/language skills, and vocational educational programs.

G. Employment Assistance
Programs that provide employment counseling, job training, and placement.

H. Childcare and Child Development
Persons or facilities for childcare including childcare centers, preschools, Head Start, family day care, care in the child's home, and before- and after-school care.

I. Youth Development
Boys' and girls' clubs, scouting, Big Brothers and Big Sisters, organized recreation programs.

J. Foster Care
Programs that include adoption, foster family care, group-home care, institutional care, and residential care.

K. Health Care
Prevention, screening, and treating child and family health problems; community health clinics.

L. Health Promotion Programs
Programs designed to promote positive health behaviors including family planning, health education, smoking cessation, nutrition education, weight control, child safety, and accidental injury prevention.

M. Mental Health
Services and programs that include mental health diagnosis and treatment, inpatient and outpatient psychiatric care, and residential care.

N. Family Counseling and Support Services
Assistance to families that includes counseling, support groups, respite care, homemaking and parenting skills training, and family budgeting.

O. Services for Children and Adults with Special Needs
Programs that include screening, identification, referral, assessment, therapy and education services, service planning, and service coordination.

P. Alcohol and Other Drug Abuse Prevention/Treatment
Prevention services include programs sponsored by schools or community agencies that provide education about drugs, alcohol, and nicotine. Treatment includes inpatient, outpatient, day treatment, detoxification, follow-up/aftercare, and counseling.

Q. Crisis Intervention
Services and facilities for those affected by child abuse and domestic violence. This includes crisis lines, emergency home attention, and emergency shelter.

Thank you for completing this survey.

Please return to:_____

providers, and to get their buy-in for filling out the survey and participating in the assessment. It is important to stress how the information will help them target their services and better meet the needs of their participants. Ask the director to identify a staff person with the time and the expertise to fill out the survey.

Distributing

Send a copy of the survey both to the director and the designated staff person. Make sure to give a reasonable time in which to fill out the survey (two to three weeks), and to include information on where to send the completed survey.

Following Up

With many, if not most, providers follow-up will be important. With key providers it may be important not only to do follow-up, but even to fill out the information with the key contact over the phone.

Using the Information

Information from the provider survey will be useful not only as an information base for the community assessment, but also for later resource and referral purposes. In order to maximize the usefulness, it will be important to enter the information so that it will be easily retrievable for resource and referral purposes

Association Surveys

Association surveys are used to collect information on the informal organizations in the community. In general, assessing the informal service system includes the following steps:

Designing

Association surveys should answer the following questions:

- Who can join?
- What do members do?
- How many individuals and families do they serve?
- When (which days and hours) do they provide services?
- At what site(s) do they provide services?
- What geographic areas do they serve?
- What is the composition (in terms of gender, race, and training and education) of the staff?
- What are the eligibility requirements for services?
- What is the cost of services to those served?
- What is the provider's maximum service capacity?
- What, if any, are membership dues?

Survey Questions for Community Clubs and Informal Support Groups

- What is the mission or purpose of the organization or group?
- What activities does it undertake?
- Who makes up the membership, and how many members are there?
- When and where does it meet?
- How does one become a member?
- What are the benefits of membership for individuals and for the community?
- Whom should be contacted for more information about participating?

Community Associations and Informal Support Groups[6]

Artistic Organization
choral, theatrical, writing

Business Organization
Chamber of Commerce, trade association

Charitable Group
Red Cross, Cancer Society, United Way

Church Group
service, prayer, maintenance, stewardship, acolytes

Civic Event
Fourth of July celebration, art fair, Halloween

Community Support Group
friends of the library, block club

Group for the Elderly

Ethnic Association
Sons of Norway, Black Heritage Club

Health and Fitness Group

Interest Club
poodle owners, antique car owners

Local Government
town, township, electoral unit, fire department, emergency unit

Local Media
radio, newspaper, local access, cable TV

Men's Group
cultural, political, social, educational, vocational

Mutual Support
Alcoholics Anonymous, Epilepsy Self-Help, La Leche League

Neighborhood or Block Club
crime watch, beautification, Christmas decorations

Outdoor Group
garden club, Audubon Society, conservation club

Political Organization
Democrats, Republicans, caucuses

School Group
printing club, PTA, MADD

Service Club
Zonta, Kiwanis, Rotary

Social Cause Group
peace, rights, advocacy, service

Sports League

Veteran Group
American Legion, Amvets, VFW

Women's Group
cultural, political, social, educational, vocational

Youth Group
4H, Future Farmers of America, Scouts, YWCA

6. *Kretzmann and McKnight, 127.*

Again, there will be a tension between getting detailed information and keeping the survey short in order to get more responses. In general, it is more useful to get detailed information back from a few agencies then to get generic information back from many. A sample provider survey is included in this packet.

Supplying Accompanying Information

Your association survey should include a cover page with introductory information on:

- The goals of the larger initiative
- Why provider information is being collected
- How the information connects to the rest of the assessment
- How the information will be used (both specifically the information from the provider survey and the information from the larger assessment)
- Why providers should be a part of this process
- How and when the information will be shared

Pilot-testing

As with resident surveys, it will be important to pilot test the survey to make sure that all terms are clear and questions are understandable. Again, if significant changes are needed after a first pilot test a second pilot test may be needed.

Identifying Associations

Identifying informal associations and organizations is often a challenge. Look to community bulletin boards at libraries, churches, and coffee shops. Ask key informants at associations you have identified to tell you about other associations they know of. Finally use residents involved in the planning process to identify the organizations they and their friends and families use.

Contacting Associations

Before sending the survey, it is important to begin building relationships. After associations are identified using the methods described above, a key contact at each agency should be contacted. This contact serves a two-fold purpose: to inform them of the planning effort and of the potential to get their buy-in for filling out the survey and participating in the assessment. In the conversation it is important to stress how the information will help them target their programs and better meet the needs of their participants.

Distributing

Send a copy of the survey to the designated contact person. Make sure to give a reasonable time in which to fill out the survey (two to three weeks), and to include information on where to send the completed survey.

Following Up

With many, if not most, associations, follow-up will be important. With key providers it may be important not only to do follow-up, but even to fill out the information with the key contact over the phone.

Using the Information

Information from the association survey will be useful not only as an information base for the community assessment, but also for later resource and referral purposes. In order to maximize the usefulness it will be important to enter the information so that it will be easily retrievable for resource and referral purposes.

Consumer Surveys

Documents 16 and 17 are examples of consumer surveys.

A survey asking community residents to assess the quality of services available to them can complement the service provider survey. Service providers' and consumers' perceptions of the availability and quality of existing services sometimes differ from one another. Those who use the service system often can provide valuable insights into services that are strengths upon which the community can build, as well as services that need improvement or that residents are not aware of.

In many ways, the process of conducting this type of resident survey is the same as the process described in chapter four. The steps include: (1) designing a survey (see appendix for additional guidelines), (2) pilot-testing the survey, (3) compiling a representative list of consumers, (4) mailing the surveys or conducting verbal interviews to obtain the answers, (5) following up with consumers to ensure they return the survey (if mailed), and (6) logging the data. Each of these steps parallels those suggested for focus groups, interviews, and surveys in chapter four. In analyzing the data, planners should focus on noting the strengths and weaknesses identified consistently by consumers, as well as the services that residents seem not to know about.

Document 16

Consumer Survey: Quality of Community Services

Please indicate the level of quality of each of the following services in your community.

Service	Strong	Adequate	Weak	Don't Know
Childcare				
Before-school programs				
After-school programs				
Crisis nursery services				
Child day care				
Adult day care				
Head Start				
Pre-school care				
Community Organization/Advocacy				
Block clubs				
Chamber of Commerce				
Crime watches				
Home ownership initiatives				
Leadership/grassroots organizing training				
Conservation clubs				
Ethnic associations				
Political parties				
Kiwanis, Rotary, etc.				
Senior citizen groups				
Friends of the library				
Friends of the park				
Crisis Intervention/Counseling				
Crisis counseling and referral				
Domestic violence shelters				
Emergency housing/homeless shelters				
Education/Literacy/Mentoring				
Adult education				

Please indicate the level of quality of each of the following services in your community.

Service	Strong	Adequate	Weak	Don't Know
GED preparation				
Basic skills training				
Employment and Training				
Career development				
Job training				
Job placement				
Employment services				
Employment assistance				
Family Service				
Parent support groups				
Child safety classes				
Classes on child development and parenting				
Self-help groups/support groups				
Parent warmlines				
Parent-and-child enrichment programs				
Sex education				
Health—Physical				
Perinatal support				
Prenatal parenting education and support				
Primary health care				
Health education				
Family planning				
Primary prevention				
Diagnosis/assessment				
Treatment (inpatient or outpatient)				
Treatment for special populations				
WIC services				

Consumer Survey: Quality of Community Services

Please indicate the level of quality of each of the following services in your community.

Service	Strong	Adequate	Weak	Don't Know
Health—Mental				
Anger management				
Family therapy				
Group therapy				
Individual counseling				
Marital counseling				
Stress reduction				
Vocational rehabilitation				
Community mental health services				
Information and Referral				
Outreach services				
Legal Aid Counseling/Services				
Law enforcement				
Legal aid				
Victim assistance				
Public Assistance				
TANF				
Childcare assistance				
Food stamps				
Medicare				
Medicaid				
Unemployment compensation				
Supplemental Security Income				
Housing assistance				
Energy assistance				
Disability insurance				

Consumer Survey: Quality of Community Services

Please indicate the level of quality of each of the following services in your community.

Service	Strong	Adequate	Weak	Don't Know
Substance Abuse Treatment				
Inpatient treatment				
Outpatient treatment				
Teen intervention				
Adult intervention				
Prevention				
Alcoholics Anonymous (& other 12-step substance abuse treatment programs)				
Youth Development				
Sports				
Arts and crafts				
Performing arts				
Agriculture				
Reading clubs				
Hobbies				
School-Based/ School-Sponsored Programs				
Preparation for parenthood/ family life education				
Prevention education/child safety classes				
Substance abuse prevention				
Drop-out prevention				
Teen parent programs				
After-school programs				

Section I. Describe your family

1. How old are you?
   - ❑ 18-24
   - ❑ 25-34
   - ❑ 35-44
   - ❑ 45-64
   - ❑ 65 and up

2. Are there children in your household?
   If so, how old are they? (check all that apply)
   - ❑ 0-3
   - ❑ 4-7
   - ❑ 8-12
   - ❑ 13-18

3. What race/ethnic group(s) are you?
   - ❑ African-American _____
   - ❑ Caucasian _____
   - ❑ Latino _____
   - ❑ Asian/American _____
   - ❑ American Indian _____
   - ❑ Other _____

4. What is your zip code? _____

5. How long have you lived in this community? _____

What are your perceptions of (community)?

6. How do you like living in this community?

7. How connected do you feel to other community members?

8. How safe do you feel in this community?

9. What are the best things about this community?

10. What things about this community would you most like to see change?

11. What would you be willing to do to help change this community?

What are your perceptions of the health and social service system in (community)?

12. Which of the following services do you use in (community)? If not, indicate why not.

	Yes	No	Why Not
A. Outreach, identification, and referral	____	____	_____
B. Linkage to public assistance	____	____	_____
C. Case management/service coordination	____	____	_____
D. Housing assistance	____	____	_____
E. Transportation	____	____	_____
F. Adult education	____	____	_____
G. Employment assistance	____	____	_____
H. Childcare and child development	____	____	_____
I. Youth development	____	____	_____
J. Foster care	____	____	_____
K. Health care	____	____	_____
L. Health promotion programs	____	____	_____
M. Mental health	____	____	_____
N. Family counseling and support services	____	____	_____

	Yes	No	Why Not
O. Services for children and adults with special needs	____	____	_____
P. Alcohol/drug abuse prevention and treatment	____	____	_____
Q. Literacy	____	____	_____
R. Alternative health care	____	____	_____
S. Parenting education	____	____	_____
T. Crisis intervention	____	____	_____
U. Civil rights and legal services	____	____	_____
V. Recreation	____	____	_____
W. Dental	____	____	_____
X. Vision care	____	____	_____
Y. Services for gays, lesbians, and transgender individuals	____	____	_____
Z. Senior services	____	____	_____
AA. Adult day health care	____	____	_____
BB. Emergency care	____	____	_____
CC. Other _____			

13. How do you pay for services?

❑ Privately insured ❑ Medicare ❑ MediCal Uninsured ❑ General Relief

14. Please respond to the following statements about the health and social services system in (community).

6=Always 5=Usually 4=Sometimes 3=Rarely 2=Never 1=Don't Know

a. Children and families receive adequate services as needed ____
b. Programs reach all children and families who need them ____
c. Services are easily accessible to families ____
d. Services for children and families are well coordinated ____
e. Referrals are shared between agencies ____
f. There is problem solving among agencies to fill gaps in services ____
g. Children and families are a very high priority with health/social service agencies ____
h. Agencies are in conflict with one another ____
i. Agencies have conflicting rules and eligibility requirements ____
j. Duplication of services is a problem ____
k. Children and families face barriers to obtaining services ____

15. Please rate the overall quality of the services you use

❑ Excellent ❑ Good ❑ Fair ❑ Poor

16. What actions would best improve our service system in (community)?

17. Do you think your family is healthy? If not, what are your major health issues?

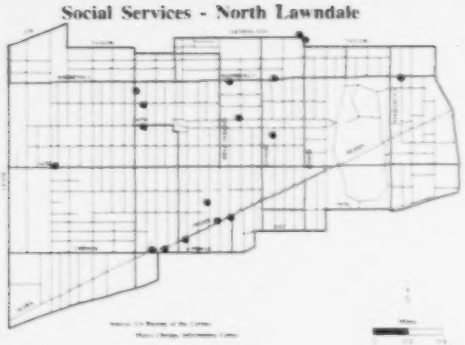
Community Mapping

As the planning team proceeds in conducting the resources assessment, they will find it useful to map all services identified, especially as they meet with residents. The planning team should identify the locations of doctors' offices, parks where children can play, banks that cash public assistance checks, swimming pools, laundry services, meeting places, and low price supermarkets to determine community access to such services.

In some communities, it will be useful to map locations of offices to which families go to obtain services (such as mental health services) or to enroll in programs (such as Head Start). This is important to understanding how accessible such programs are to families, and the extent to which office location affects rates of participation.

Social Services

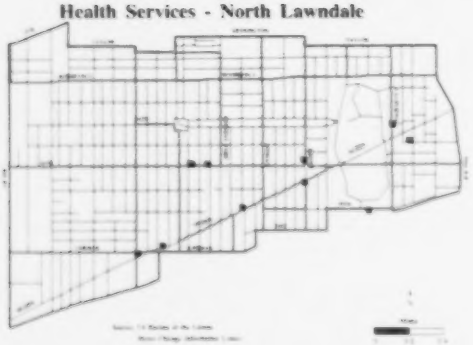
Social Services - North Lawndale



This series of maps depicts the locations of several types of social services in Chicago's North Lawndale community.

Health Services

Health Services - North Lawndale



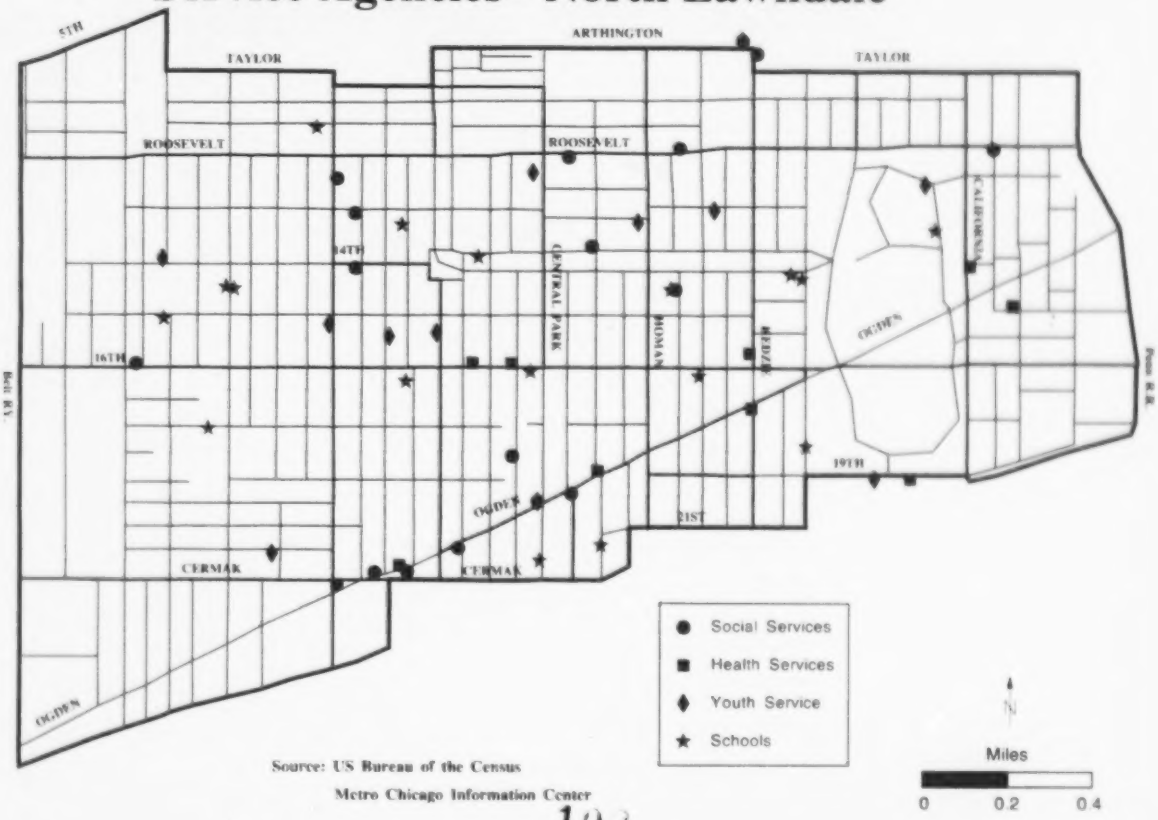
Examples of community resources:

- Doctors' offices
- Parks where children can play
- Banks that cash public assistance checks
- Swimming pools
- Laundry services
- Meeting places
- Supermarkets that offer the lowest prices

Mapping community-based resources may reveal problems with certain locations and may give insight into the best locations for family centers or other services. It can draw attention to the need for a variety of services and supports for all families within the community and the need for them to be available in the neighborhoods in which families live. Also, it should help to identify areas in which there are few services within easy access of the families who need them. The mapping process should be connected to the process by which the planning team obtains information from community residents, because this information is essential to accurate mapping. One community even convened children's focus groups to get an accurate picture of where children went after school hours.

Service Agencies

Service Agencies - North Lawndale



Source: US Bureau of the Census

Metro Chicago Information Center

Analyzing the Data

Because of the nature of the data, the preliminary report from the resource assessment subcommittee to the planning committee can be relatively brief. It should consist of: (1) a one-page summary of each community agency, group, and individual that serves families; (2) a chart of agencies, groups, and individuals that serves families organized by function; (3) a chart showing a preliminary assessment of the strengths and weaknesses in each area of services and support; and (4) a chart showing a preliminary assessment of the degree to which services and support in each area are functioning, with respect to their full capacity.

Because this community assessment process is driven by community residents and their priorities, the relative importance of any community resource only becomes apparent after the residents have had a chance to speak. Therefore, the resource assessment subcommittee can keep its initial report brief, and should be prepared to conduct a second round of analysis after the subcommittees in charge of creating a community profile and engaging community residents have reached some conclusions about the community's priorities.

Steps to Get You Started

To begin to assess the strengths and resources of the community, the planning team can answer these questions:

- **How should the planning team identify all formal and informal community resources?**
- **Does a community resource directory exist?**
- **Can the United Way or state, county, and local governments provide a list of contracted agencies?**
- **What outreach efforts will be used to engage residents in the process of identifying resources?**
- **Who will design the resource assessment survey to be completed by providers of services and support?**
- **How will the survey be distributed?**
- **Who will follow up the distribution of surveys to encourage providers to complete and return them?**
- **Who will log the data from the surveys?**
- **What categories of resources should be established?**
- **How will formal and informal resources be mapped?**

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Setting Community Priorities

Part 2

All together, the information-gathering strategies described in Part One result in a large body of information that the larger planning team will have to assess and prioritize prior to going further with strategic planning. Part Two focuses on how to sort through the information to create a core priority list.

The planning team has formed subcommittees throughout the planning process thus far to complete the work of developing a statistical profile; obtaining residents' perspectives on community needs through focus groups, interviews, and surveys; and assessing the community's assets and resources. This book has made specific recommendations about how to organize and analyze the data collected by each of the subcommittees. Each subcommittee is now prepared to integrate its own findings with the others', to arrive at a single and coherent picture of the community as a whole. Planners have the following responsibilities when it comes time to analyze data:

Statistical Profile Analysis

The statistical profile subcommittee locates the facts, figures, statistics, and data that accurately describe the well-being of all families in the community. This subcommittee also identifies empirical evidence that demonstrates the community's significant strengths or weakness, relative to other communities or parts of the state.

Interview and Survey Analysis

The planning team members who were involved in implementing interviews and surveys use these tools to compile information about specific community assets and concerns, services most commonly utilized by residents, barriers to services, and the roles that residents wish to play in improving their community.

Focus Group Analysis

Although they have played a role in the interviews and surveys, the focus group analysis subcommittee provides more in-depth and detailed information concerning community strengths and challenges, connections between community needs and consumers' awareness of services that address those needs, and connections between specific challenges and concerns and potential solutions to each of them.

Assets and Resources Analysis

The resource analysis subcommittee identifies the formal and informal services and support that constitute the community's strengths and assets. The rest of the planning team will look to this subcommittee for recommendations about how to build on the strengths of the community.

Analyzing and synthesizing all of the subcommittees' findings is not just a matter of adding up responses, but rather, it involves looking for areas of confirmation and conflict. Areas of confirmation occur when all information sources identify a specific issue as being important. For example, focus groups, interviews, and surveys may all identify employment as a pressing concern within the community. In general, if two or more sources agree that an issue is important, the issue should be considered to be worth further exploration. Issues that don't emerge as crucial from any one source of information, but are mentioned consistently in each, often represent community needs that affect all families, not just those in crisis, and which require long-term attention.

Areas of conflict are those areas which one source of information, but not the others, defines as important. Areas of conflict can arise when there is a specific issue that people are reluctant to discuss. Child abuse, for example, is likely to come up in an analysis of the statistical profile data, or perhaps in an interview with a provider, but may not come up in surveys or focus groups. Areas of conflict may also arise around the specific interests of minority groups. A focus group of teenage mothers may bring up concerns that would be not be validated by statistics or survey data describing the larger population. Finally, an area of conflict simply may arise from an anomalous response from an individual who has a "pet" concern, or from statistical data that is out of date or doesn't represent the whole community.

If residents' opinions don't carry weight in setting community priorities, then the process will be no different from traditional, professional-driven planning efforts, which historically have alienated community members and negatively impacted service delivery.

In determining whether an area of conflict should be explored further, planners must answer the following questions:

- How important is this issue to the mission of the initiative? For an initiative aimed at the welfare and safety of young children, even a single mention of child abuse may be too important to ignore.
- Who felt that the issue was important?

The second question is especially important if the initiative is targeting selected groups, such as parents of young children, pregnant women, etc., and the feedback of those groups would carry a lot of weight. The input of some individuals or groups (social service professionals, teachers, or elected officials, for example) may be swayed by their professional position. Conflict between the opinions of residents and of professionals in the community is often best resolved by placing more weight on the opinions of residents. The entire assessment process is focused on understanding the challenges, concerns, interests, and hopes of residents. If residents' opinions don't carry weight in setting community priorities, then the process will be no different from traditional, professional-driven planning efforts, which historically have alienated community members and negatively impacted service delivery.

Document 18, the Community Assessment Matrix, provides a framework and instructions for setting priorities.

Community Assessment Matrix

Issue	Population to be Served	Data	Current Capacity	Gap	Priority Level

Issue:
Fill in those issues and concerns that emerged repeatedly in focus groups, interviews, and surveys, or are readily apparent in a scan of the profile data.

drug abuse

Population to be Served:
For each issue listed in the previous column, identify the specific populations that are most affected—not necessarily the single population most affected, but populations that may be affected in different ways.

teens at risk of drug use, adults 18–35 in need of treatment services

Data:
Provide data pertaining to the identified concern and to the populations affected. How prevalent is the concern? How many individuals belong to the at-risk population? What are their characteristics?

number of teens in the community, percentage of teens exhibiting risk behaviors, demographic profile of this population

Current Capacity:
Fill in the current capacity of organizations in the community that have programs designed to address the identified concern. If possible, include information about how well these services are utilized.

32 slots in school-based parent-student drug prevention classes, 10 slots used; 56 slots in a park-district activity program with a strong drug prevention component, waiting list of one year

Gap:
Assess the current gap between services available and services needed, for each issue identified. Are current services sufficient? Is there a need for additional services? Are services sufficient in number, but under-utilized because they are poorly structured or not what community members want?

88 slots in drug prevention programs for a high-risk teen population of 700; greater need for activity-based program like the park-district program

Priority Level:
After the first five columns have been completed with respect to each issue, prioritize the issues from column one, determining which issues will be focused on initially, which will be focused on after the first year, after the second year, etc., and which will be taken off the table. This priority-setting should be based on the information in the rest of this chart and concerns such as: cost, time needed for implementation, community concern for specific target populations, and other community-specific issues.

For example, drug use may be chosen as an immediate priority area because:

- *Teens are a group of particular interest to the community*
- *This issue came up consistently in focus groups, interviews, and surveys*
- *Current programs do not address the concern expressed by the community*

Include an assessment of whether programs directed toward addressing this concern could be funded through known sources of funding.

- *Drug Free Schools money to fund additional drug abuse prevention program slots*
- *A state grant makes $300,000 available to communities planning programs in this area*

Only areas of conflict that are deemed important after the above analysis should remain on the planning table. Once the community assessment data has been analyzed for areas of confirmation and conflict, the planning team should have a core set of issues that it can then prioritize.

The Community Assessment Matrix and the instructions that follow it provide a framework for setting priorities. The first column of the matrix ("Issue") is to be a list of the issues being discussed. These are not all of the issue areas identified by the community assessment—only those that, through an analysis of confirmation and conflict, have been determined to be important. If this list is longer than 15 issues, it may be necessary to further restrict the initial planning effort to the top 10.

The second column ("Population to be Served") will be a list of the specific populations that are most affected by each issue listed in the previous column. This is not necessarily the single population most affected, but may include multiple populations affected in different ways. Information about each population should include: the number of people affected by the issue, the number of people at risk of being affected, and descriptions of specific groups or populations within the community that are affected. Much of this information should come from the community assessment, although planners may have to collect some additional data.

The third column ("Data") is intended for specific data or information that is relevant to the corresponding issue. Data should answer such questions as: How prevalent is the issue? How many individuals belong to the at-risk population? What are their characteristics? What geographic areas, in particular, are affected by the issue? If the issue is crime, for example, the number of police call-boxes and the incidence of violent crime might be two pieces of data to list.

The fourth column ("Current Capacity") should include information on the current capacity of organizations that provide programs or services to address the respective issue identified. This information should come from the resources assessment analysis. Whenever possible, this should include information about the degree to which these services are utilized. Often, the precise number of available slots is difficult or time-consuming to collect. A first step might be to get a rough idea of whether programs are operating under, at, or over capacity, in a general sense.

The fifth column ("Gap") should include an assessment of the current gap between services available and services needed. Are current services sufficient? Is there a need for additional services? Are services sufficient in number, but under-utilized because they are poorly structured or not what community members want? This information should be based on a comparison between the population affected and the community's current capacity. In some cases, although a population is undeserved and services are available,

Based on completion of the community assessment matrix, the planning team should be able to work with the community to prioritize its challenges, concerns, and opportunities. Prioritizing does not mean simply ranking the issues on the list, but rather, it involves grouping them within categories.

services are still under-utilized. This most likely indicates issues involving how services are being delivered or offered. Planners may need to gather additional information to determine these issues of outreach, accessibility, cost, hours of operation, and delivery method, or other structural issues. Based on completion of the community assessment matrix, the planning team should be able to work with the community to prioritize its challenges, concerns, and opportunities. Prioritizing does not mean simply ranking the issues on the list, but rather, it involves grouping them within categories. Suggested categories include, but need not be limited to: issues to be addressed immediately, issues to be addressed in the short term, issues to be addressed in the long term, and issues to be taken off the table for the time being.

Prioritizing the Issues

Prioritizing the issues is a matter of deciding: Which issues involve lack of service availability? Which issues benefit from having resources upon which to build? Which issues affect populations that are relevant to the initiative? Which issues affect a broad range of individuals in the community? Which issues cannot be addressed immediately because of constraints involving resources, knowledge, or structure?

The nominal group process involves several steps:

1. Presentation of findings with regard to each issue
2. Answering any questions raised by the group
3. Voting on which issues are most important
4. Tallying votes
5. Presenting results of votes
6. Categorizing each issue requiring "immediate," "short-term," or "long-term" action

Typically, each participant can use three to five votes, but can use only one vote for any one issue on the list.

The planning team should consider inviting community residents, leaders, advocacy groups, parent groups, service providers, elected officials, interviewees, and focus group participants to the meeting at which priorities will be decided. There are obvious advantages and disadvantages to including any of these people in the process. The more inclusive the process, the greater the number of people who will be supportive of the decisions. The decision of whom to include is best made locally.

Regardless of which community members are present at the meeting, a discussion or brainstorming session can help those present prepare to cast their votes on what the community's priorities should be as it initiates new services or revises existing ones. Together or in small groups, they can list populations or areas with the greatest need; services that are currently provided; and services, programs, or strategies that would produce the greatest short-term results, produce the greatest long-term results, be the least expensive, be the most "do-able," or be the least likely to be funded through other sources. While individuals can brainstorm on these subjects on their own, working as a group encourages communication and consensus building.

Planners may find the nominal group process, described below, useful for conducting a priority-setting meeting among a larger group of individuals—a group of up to 80—in a "town meeting" setting.

Nominal Group Process

The nominal group process is a method of decision making that enhances community participation. It was developed as a response to the growing involvement of community members in decision making during President Lyndon Johnson's War on Poverty, and at its most basic level, empowers community participants to vote for the issues that they think are most important. The votes are then tallied and the issues are ranked in order of number of votes received. This process puts participants in the decision-making process at ease because each one's vote carries as much weight as the next. The nominal group process works best when used to reach consensus in problem identification, goal setting, and prioritizing issues or strategies; it is not an effective tool for building consensus in situations in which there is an unequal distribution of decision-making power.

Having completed the community assessment matrix and having prioritized the issues identified, the planning team will have answered the most critical questions related to this stage of strategic planning:

1. What issues are most important to community members and to the initiative?
2. What are the characteristics of individuals being affected by these issues, and how many of them are there?
3. What other information characterizes these issues?
4. What services and resources are already in place in the community that relate to these issues?
5. What are the gaps in these services and resources?
6. How urgently do these issues need to be addressed, and in what time frame is it feasible to do so?

Once these questions have been answered, the community may be ready to plan the new or revised services or programs.

Conclusion

The community assessment process described here is not an activity to be completed at the beginning of a community planning effort, and then abandoned as the planning team moves on to other activities. The assessment provides baseline information that should be updated and used in assessing the progress of the new or reconfigured services or programs. Focus groups, interviews, surveys, and the other means of gathering information that have been discussed here are valuable ways to obtain families' ideas throughout the life of the program, and should be employed in subsequent phases of program planning and implementation.

Appendix 1

Guidelines for Developing a Resident Survey

1. Question Content

a. Is the question necessary? Just how will it be useful?
   1. Is the point already sufficiently covered by other questions?
   2. Does the subject matter require a separate question or can it be integrated with other questions?
   3. Is the question unnecessarily detailed for the purposes of the study?
   4. Does the question adequately cover the material intended?
   5. Does the language of the question make the point clearly?

b. Do respondents have the information necessary to answer the question?
   1. Is it a matter they can report on adequately?
   2. Does it call for information they either cannot give at all or cannot give reliably?
   3. Is the point of the question within the realm of their experience or expertise?
   4. Is the question written in their language and at their reading level?

c. Does the question need to be more concrete or require more specific information?
   1. Is it too general?
   2. Does it help respondents recall information that they might not otherwise recall? (One way of doing this is to ask respondents to recall a series of events in sequence.)

d. Might the question elicit inaccurate or misleading responses?

e. Is the question biased in one direction without accompanying questions to balance the emphasis?

1. Is the question unfair or inaccurate in any way?
2. Is the question likely to elicit answers that will unduly favor one side of the issue and therefore skew the results?
3. Is the question sensitive enough to respondents' gender, race, age, religion, socio-economic status, etc. to prevent undue bias in responses?

f. Will respondents feel comfortable giving the information asked for in the question?
   1. Is the material too private, or of an embarrassing nature, or otherwise likely lead to resistance, evasion, or deception?
   2. Does the question put respondents "on the spot" or make them feel as though they were being "quizzed?"

2. Question Wording

a. Is the question likely to be misinterpreted or misunderstood?
   1. Does it contain any difficult or unclear wording?
   2. Are the words simple enough to be understood by the least educated resident?
   3. Are any terms (jargon) used in a specialized way without being accompanied by an explanation?
   4. Is the question's true meaning clearly distinguished from other possible interpretations that respondents may have?

b. Does the question adequately express the alternatives with respect to the point?

c. Is the question misleading because of unstated assumptions or unexplained implications?
   1. Is the frame of reference clear and uniform for all respondents?

3. Answer Formulation

a. Is the survey well structured and easily understood, given the number of questions it asks?

b. Does the survey contain one or several unstructured questions near the end, to allow for respondent comments not specifically requested earlier?

c. Is the form of response easy, explicit, consistent, and suitable for the purpose?

d. When appropriate, does the question contain an "other" category and a space in which respondents can write an answer that would otherwise not be an option?

e. Is the answer to the question likely to be influenced by the content of the preceding questions?
   1. Do earlier questions create a set of expectations that might influence answers to this question?
   2. Do the preceding questions aid the recall of ideas that relate to this question?
   3. Does this question become inappropriate if certain answers were given to previous questions?

f. Is there a natural transition to the question?

g. Does the question come too early or too late to arouse respondents' interest and attention or to help avoid resistance to answering?

Appendix 2

Document Tools Included in Know Your Community

Document 1	Community Assessment Process (diagram)
Document 2	Creating a Community Profile: Indicators of Community Conditions
Document 3	Creating a Community Profile: Data Collection Planner
Document 4	Sources of Information (diagram)
Document 5	Information-Gathering Strategies
Document 6	Script for Approaching Potential Interviewees
Document 7	Confidential Community Resident Survey (Example 1)
Document 8	Confidential Community Resident Survey (Example 2)
Document 9	Status Record: Information-Gathering Strategies
Document 10	Status Record: Resident Surveys
Document 11	Status Record: Focus Groups
Document 12	Status Record: Key Informant Interviews
Document 13	Resources Assessment Information Collection Record
Document 14	Cover Sheet for Survey
Document 15	Family Survey
Document 16	Survey of Organizations and Agencies Serving Children, Youth, and Families
Document 17	Consumer Survey: Quality of Community Services
Document 18	Community Assessment Matrix

Know Your Community: A Step-By-Step Guide to Community Needs and Resources Assessment is a complete, easy-to-use manual that walks you through the process of getting all of the important information you need about your community — including hidden resources. This revised second edition of Know Your Community contains even more tools to help you assemble a complete view of your community's needs and resources, to ensure that your programs and services will work, and to periodically evaluate your progress. This strengths-based, hands-on guide leads you through the process of identifying each community asset (whether it's a prenatal education program or a woman who teaches piano lessons for free). With its field-tested alternatives and strategies for involving community residents, you'll get the vital information you need to make your program really effective.

Here's what the experts said about the first edition: **"Know Your Community** is a valuable, practical, user-friendly guide. Its holistic approach lends itself to helping community members focus on community strengths and available resources, as well as identifying needs and service gaps." **Maggie Holmes, Partnership Project, National Head Start Association**

Know Your Community

Know Your Community.

Paul Vivian, Connecticut Family Resource Centers

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Miriam Westheimer, Home Instruction Program for Preschool Youngsters (HIPPY)

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Mindy Lewis; Focus 2000 Children, Youth, & Families Initiative; Columbus, Indiana

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Moncrieff Cochran, Department of Human Development and Family Studies, Cornell University

Sara Watson, Center for the Study of Social Policy

The Family Resource Coalition of America is a membership, consulting, and advocacy organization that has been advancing the movement to strengthen and support families since 1981. The family support movement and FRCA seek to strengthen and empower families and communities so that they can foster the optimal development of children, youth, and adult family members. FRCA builds networks, produces resources, advocates for public policy, provides consulting services, and gathers knowledge to help the family support movement grow.